



U.S. Department of Transportation

National Highway Traffic Safety Administration

Dear Crash Data Researchers/Users:

Thank you for choosing crash data from the National Highway Traffic Safety Administration (NHTSA) for your research or other use. The information contained in this motor vehicle crash report is collected, maintained and distributed in accordance with Public Law 89-564. In accordance with this Public Law, NHTSA is required not to release any case information until completion of quality control procedures. These procedures include a review of the case material to extract all names, licenses and registration numbers, non-coded interview material, non-research related researcher comments in the margins, non-factual data, and the production number portion of the vehicle identification number (VIN).

If you requested NHTSA to query its database files in order to identify a specific crash, then that query was made using non-personal descriptors you provided for use in our search. This motor vehicle crash may have been identified from a data search and matches the general, non-personal descriptors you provided, but we cannot confirm that this is the specific crash report you requested.

If you have any questions with regard to the above procedures, please contact the Field Operations Branch, Crash Investigation Division, National Center for Statistics and Analysis at 202-366-4820. Again, please be advised that we cannot confirm that this is the case that you have specifically requested nor can we certify the information to be correct.

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U.S. Department of Transportation National Highway Traffic Safety Administration

CASE SUMMARY

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

PSU04_	TYPE OF ACCIDENT _	Car/Car - Head on	
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A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

(Provide a summary of the accident sequence as well as any particular event of the accident that is noteworthy. Injury mechanism and vehicle crashworthiness is the focus, not driver culpability. <u>Do not include any personal identifiers.</u>)

V1 was traveling south on a two lane roadway negotiating a curve left. V2 was traveling north on the same roadway. V1 lost control and crossed in to the northbound lane. The front of v1 lightly impacted the front of V2 causing V1 to initiate an overturn. V1 rolled at least tow complete turns. Both vehicles were towed due to damage. Both occupants of V2 were transported for "C" injuries and the second left passenger of V1 for "B" injuries.

	B. VEHICLE PROFILE(S)								
	Class	Most Severe Damage Based on Vehicle Inspection							
Vehicle No.	of Vehicle	Year/Make/Model	Damage Plane	Severity Description	Component Failure				
01	Intermediate	1993 BMW 325 is	Тор	Moderate	None				
02	Subcompact	1992 Nissan Sentra	Front	Unk.	Unk.				

DO NOT SANITIZE THIS FORM

C. PERSON PROFILE(S)						
Person	Seat	Restraint		Most :	Severe TED BY	Injury ZONE CENTER)
Role	Position	Use	Body Region	Injury Type	AIS	Injury Source
		:				
Driver	Front Left	None				
Pass.	Front Right	None				
Pass.	2nd Left	None				
Pass.	2nd Middle	None				
Pass.	2nd Right	None				
Driver	Front Left	L&S				
Pass.	2nd Right	Child Seat				
	,		.		,	
	Role Driver Pass. Pass. Pass.	Role Position Driver Front Left Pass. Front Right Pass. 2nd Left Pass. 2nd Middle Pass. 2nd Right Driver Front Left	Person Role Seat Position Restraint Use Driver Front Left None Pass. Front Right None Pass. 2nd Left None Pass. 2nd Middle None Pass. 2nd Right None Driver Front Left L&S	Person RoleSeat PositionRestraint UseDriverFront LeftNonePass.Front RightNonePass.2nd LeftNonePass.2nd MiddleNonePass.2nd RightNoneDriverFront LeftL&S	Role Position Use Body Region Injury Type Driver Front Left None Pass. Front Right None Pass. 2nd Left None Pass. 2nd Middle None Pass. 2nd Right None Driver Front Left L&S	Person Role Seat Position Restraint Use Injury Type AIS Driver Front Left None Pass. Front Right None Pass. 2nd Left None Pass. 2nd Right None Driver Front Left L&S

Body Region

Abdomen Ankle-foot Arm (upper)

Back-thoracolumbar spine

Brain Chest Ears Eye Elbow Face Forearm Head-skull Heart Kidneys Knee

Leg (lower)

Lower limbs(s) (whole or unknown part)

Liver

Mouth

Neck-cervical spine

Nose

Pelvic-hip

Pulmonary—lungs

Shoulder Spleen Thigh

Thyroid, other endocrine gland

Upper limb(s) (whole or unknown

part) Vertebrae Whole body Wrist-hand

Injury Type

Abrasion Amputation Avulsion Burn Concussion Contusion Crush

Detachment, separation

Dislocation

Fracture and dislocation

Laceration Other

Perforation, puncture

Rupture Sprain Strain

Total severance, transection

Unknown

Abbreviated Injury Scale

- (1) Minor injury
- (2) Moderate injury
- (3) Serious injury
- (4) Severe injury
- (5) Critical injury
- (6) Maximum (untreatable)
- (7) Injured, unknown severity

DO NOT SANITIZE THIS FORM

PSU04 CASE 201E

TYPE OF ACCIDENT: CAR/CAR - HEAD ON

A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

V1 was traveling south on a two lane roadway negotiating a left curve. V2 was traveling north on the same roadway. V1 lost control and crossed in to the northbound lane. The front of V1 lightly impacted the front of V2 causing V1 to overturn two complete turns. Both vehicles were towed due to damage. Both occupants of V2 were transported with "C" injuries and the second left passenger of V1 with "B" injuries.

PSU04

1996 Case Summary Form

BEST AVAILABLE

CASE 201E

TYPE OF ACCIDENT: CAR/CAR - HEAD ON

B. VEHICLE PROFILE(S)

V				Damage Based Inspection	
e h. No	Class of Vehicle	Year/Make/ Model	Damage Plane	Severity Descr.	Component Failure
01	Intermediate	1993 BMW 325is	Тор	Moderate	None
02	Subcompact	1992 Nissan Sentra	Front	UNK	UNK

PSU04

0

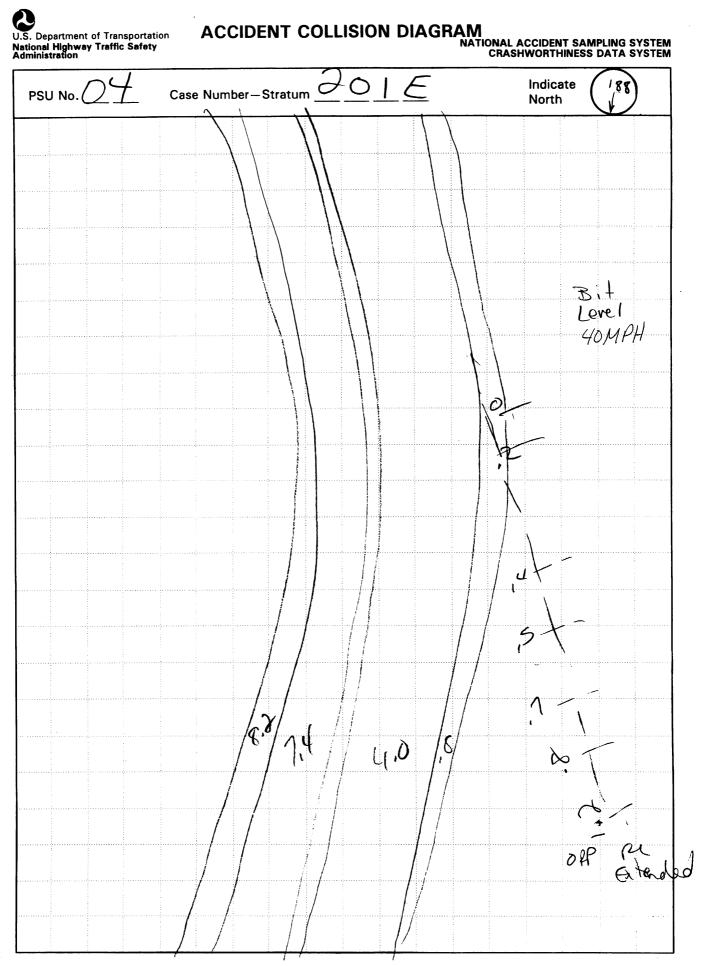
1996 Case Summary Form

CASE 201E TYPE OF ACCIDENT: CAR/CAR - HEAD ON

C. PERSON PROFILE(S)

Most Severe Injury (TO BE COMPLETED BY ZONE CENTER)

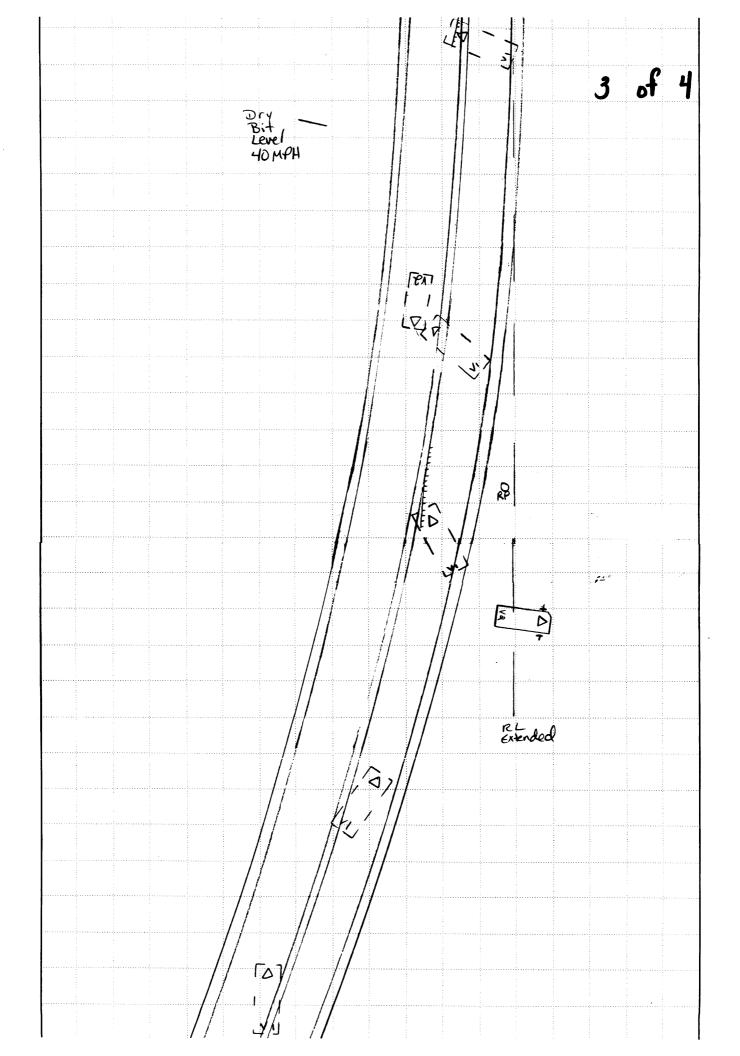
∨ e h. No	Person Role	Seat Positon	Restraint Use	Body Region	Injury Type	A I S	Injury Source
				- Jac	contusions	_,_	muror
01	Driver	FL	None	,	1 die	,	flying glass
01	Pass.	FR		hand	Lacuation	,	/ V () V
01	Pass	2L	None - che	s+	contusion	1	@ war occupent
01	Pass.	2M	None - fa	U	Magration	1	Mying glass
Οi	Pass,	28	None - k	and	Contusion	• /	Gund sectlack
02	Driver	FL	ر L&S —	shoulder	sprain	1	introv
02	Pass.	2R	Child seat	- no injuri			

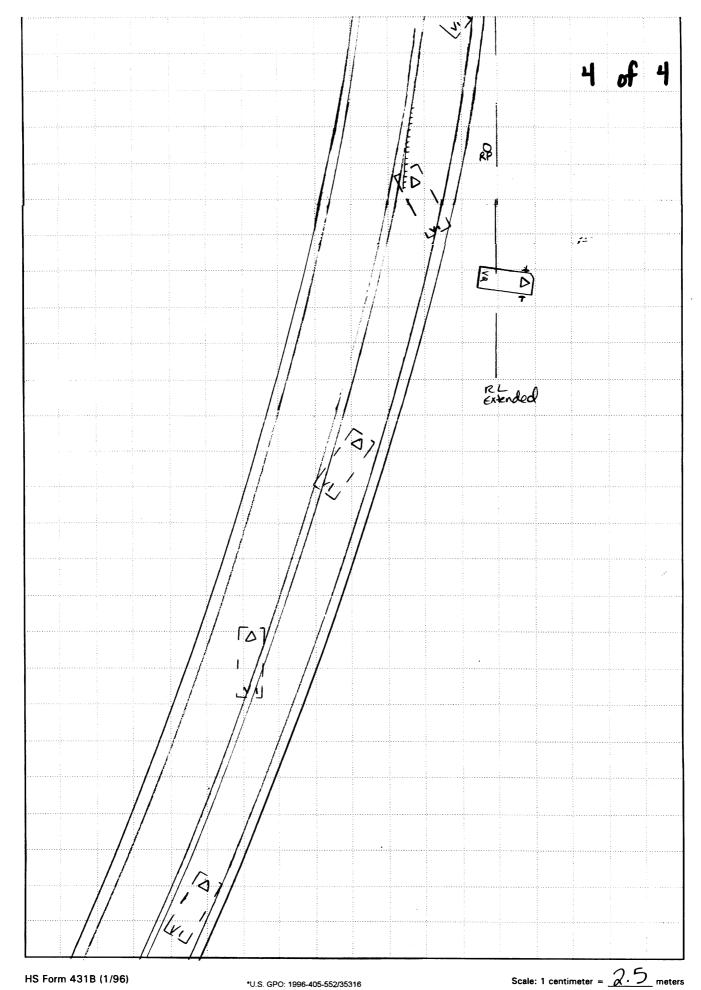


ACCIDENT COLLISION DIAGRAM NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

PSU No. <u>04</u>	Case Number-Stratum 201E	Indicate North
	V _i ,	
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U.S. Department of Transportation National Highway Traffic Safety Administration

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ACCIDENT COLLISION MEASUREMENT TABLE

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

Primary Sampling Unit Number	Y	Case N	umber –	Stratum 201E
ACCIDENT COL	LISION DIAGRAM		***************************************	
Document the physical plant:	Document vehicle	dvnamics including:		CRASH DATA
 all road/roadway delineation (e.g., curbs/edge lines, lane markings, median markings, pavement markings, parked vehicles, poles, signs, etc.) all traffic controls (e.g., signs/signals, etc.) north arrow placed on diagram roadway surface type and condition of applicable roadways grade measurements for all applicable roadways and at location of rollover initiation roadway curvature (include measurement of precrash superelevation for each vehicle if applicable) 	to physical feat scaled documer induced physical scaled documer objects contact scaled represent pre-impact, impupon either: a) physical of	ntation of all roadside ted stations of the vehicle(s) at sect, and final rest based	Grade (v Measure (at pre-c location)	Type BA Bit - Dry Dry ent of .7 .7 /h) Level level - n impact (rest) /h) level - ion of initiation) /h) level level ~
Reference Point	po la	Reference line:	Nes.	a white like
ltem		Distance and Direct from Reference Po		Distance and Direction from Reference Line
VI CF Scutf	Bez	2.80	/	6.3E
	Mid			6.1 F
	End	2.55		5.8 E
KR Scuff	Ba.	38.15	5	,7E
·	60	40.75)	IHE ,
RR fusion P	391	41.75	,	, 4W
	Mid	46.35		1.0W
	End	49.55		,8 W
Roof Gouse	Ba	50,85		1.2 €
	MY	52.55		1.2 E
	End	54.35	_	1.3 E
RR furrow Be	End	54.35	>	1.3 E
RR furrow Be	End	54,35 61.05 65,45)))	1.3 E 1.6W 1.0W

	ltem	Distance and Direction from Reference Point	Distance and Direction from Reference Line
d.	LF Rim Scrape Beg	67,35	.6E
1	· Gnd	71.75	1.1E
٦	Koof souge Bea	82,75	,8E
1	ord	86.95	1.5 E
X	LF FR	104.4	5.8 E
×	RF "	104,4	4.3 E
· 🗡	LY	101.5	5.8 C
> -	RK	101.5	4.3 E
K	It swift Beg	30.15	4,4 €
*	$\mathcal{L}_{\mathcal{A}}$	30.3	3,8E
×	VO LA FIR	8,3 N	
×	NF	10.0), / N
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ACCIDENT FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

04

2. Case Number - Stratum

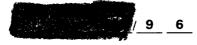
201E

IDENTIFICATION

3. Number of General Vehicle Forms Submitted



4. Date of Accident (Month, Day, Year)



5. Time of Accident

1904

Code reported military time of accident.

NOTE: Midnight = 2400 Unknown = 9999

SPECIAL STUDIES - INDICATORS

Check () each special study (SS15-SS18 below) that has been completed; code 1 for the checked special studies and 0 for the special studies not checked.

6. ___ SS15 Administrative Use



7. ____ SS16 Pedestrian Crash Data Study

(Data for this special study available in a separate file.)

8. ___ SS17 Impact Fires

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9. ___ SS18 Unsafe Driver Actions

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10. ___ SS19 Run Off Road

0

NUMBER OF EVENTS

11. Number of Recorded Events in This Accident



Code the number of events which occurred in this accident.

ACCIDENT EVENTS

For each event that occurred in the accident, code the lowest numbered vehicle in the left columns and the other involved vehicle or object in the right columnss.

Accident Event Sequence Number	Vehicle Number	Class Of Vehicle	General Area of Damage	Vehicle Number or Object Contacted	Class Of Vehicle	General Area of Damage
12. <u>0</u> <u>1</u>	13. 🔼 📗	14.03	15.	16. 02	17. 01	18. <u></u>
19. <u>0</u> <u>2</u>	20.01	21. <u>D</u> 3	22.	23. 31	24.	25. <u>//</u>
26. <u>0</u> <u>3</u>	27	28	29	30	31	32
33. <u>0 4</u>	34	35	36	37	38	39
40. <u>0</u> <u>5</u>	41	42	43	44	45	46

IF GREATER THAN FIVE EVENTS, CONTINUE CODING ON THE ACCIDENT EVENT SUPPLEMENT

	CODES FOR CLASS OF VEHICLE						
(00) Notam	otor vehicle		(31)	Large pickup truck (≤ 4,53	6 kas GVWR)		
, ,	pact/mini (wheelbase < 254 cm)			Other pickup truck (≤ 4,53			
	t (wheelbase ≥ 254 but < 265 cm)			Unknown pickup truck typ			
	diate (wheelbase ≥ 265 but < 278 cm)			Other light truck (≤ 4,536	-		
, ,	(wheelbase ≥ 278 but < 291 cm)			Unknown light truck type			
, .	(wheelbase ≥ 291 cm)			Unknown light vehicle type	-		
	n passenger car size				based)(>4,536 kgs GVWR)		
	t utility vehicle			Other bus (> 4,536 kgs G	_		
	tility vehicle (≤ 4,536 kgs GVWR)			Unknown bus type	,		
	tation wagon (≤ 4,536 kgs GVWR)			Truck (> 4,536 kgs GVW	R)		
(19) Unknow				Tractor without trailer	'''		
	(≤ 4,536 kgs GVWR)			Tractor-trailer(s)			
	an (≤ 4,536 kgs GVWR)			Unknown medium/heavy t	ruck type		
	sed school bus (≤ 4,536 kgs GVWR)			Unknown light/medium/he			
	an type (≤ 4,536 kgs GVWR)			Motored cycle	avy track type		
	n van type (≤ 4,536 kgs GVWR)			Other vehicle			
	t pickup truck (≤ 4,536 kgs GVWR)			Unknown			
-	CODES FOR CENT	201 0	DEA OF	DAMAGE (GAD)			
CDS APPLIC	CODES FOR GENEI ABLE (0) Not a motor vehicle		Right side	- · · · · · · · · · · · · · · · · · · ·	(T) Top		
AND OTHER			Left side		(U) Undercarriage		
VEHICLES	(F) Front		Back		(9) Unknown		
	(0) Non a second delication	<i>/</i> 1. \	1 - 64 - 1 - 1 -		(O) D		
TDC	(0) Not a motor vehicle		Left side	** ***	(C) Rear of cab		
APPLICABLE		(B)		nit with cargo area	(V) Front of cargo area		
VEHICLES	(F) Front			ailer or straight truck)	(T) Top		
	(R) Right side	(D)	Back (rea	r of tractor)	(U) Undercarriage		
					(9) Unknown		
	CODES FOR VEHICLE	NUMB	ER OR O	BJECT CONTACTED			
(01-30) — V	ehicle Number		(57)	Fence			
			(58)	Wali			
Noncollision				Building			
,	rturn - rollover (excludes end-over-end)			Ditch or culvert			
(32) Roll	over — end-over-end		,	Ground			
	or explosion			Fire hydrant			
(34) Jacl				Curb			
(35) Oth	er intraunit damage (specify):			Bridge Other fixed object (spec	ifv):		
(36) Non	collision injury		100	Other fixed object (spec	шу/.		
(38) Oth	er noncollision (specify):		(69)	Unknown fixed object			
(39) Non	collision – details unknown		Collisio	on with Nonfixed Object			
(00)				Passenger car, light truc	ck. van. or other vehicle		
Collision Wit	th Fixed Object		•	-			
	ii rixed Object			not in-transport			
			(71	not in-transport Medium/heavy truck or	bus not in-transport		
(41) Tree	n rixed Object e (≤ 10 cm in diameter) e (> 10 cm in diameter)			Medium/heavy truck or	bus not in-transport		
(41) Tree (42) Tree	e (≤ 10 cm in diameter) e (> 10 cm in diameter)		(72) Medium/heavy truck or) Pedestrian	bus not in-transport		
(41) Tree (42) Tree	e (≤ 10 cm in diameter) e (> 10 cm in diameter) ubbery or bush		(72 (73	Medium/heavy truck orPedestrianCyclist or cycle	·		
(41) Tree (42) Tree (43) Shru (44) Emb	e (≤ 10 cm in diameter) e (> 10 cm in diameter) ubbery or bush		(72 (73 (74	Medium/heavy truck or Pedestrian Cyclist or cycle Other nonmotorist or co	·		
(41) Tree (42) Tree (43) Shru (44) Emb (45) Bres	e (< 10 cm in diameter) e (> 10 cm in diameter) ubbery or bush pankment akaway pole or post (any diameter)		(72 (73 (74	Medium/heavy truck or Pedestrian Cyclist or cycle Other nonmotorist or co	·		
(41) Tree (42) Tree (43) Shru (44) Emb (45) Brea Nonbreakaw	e (< 10 cm in diameter) e (> 10 cm in diameter) ubbery or bush pankment akaway pole or post (any diameter) ay Pole or Post		(72 (73 (74 (75 (76	Medium/heavy truck or Pedestrian Cyclist or cycle Other nonmotorist or co Vehicle occupant Animal	·		
(41) Tree (42) Tree (43) Shru (44) Emb (45) Brea Nonbreakaw (50) Pole	e (< 10 cm in diameter) e (> 10 cm in diameter) be (> 10 cm in diameter) be between two controls and the controls are post (any diameter) between two controls are post (< 10 cm in diameter)	tor)	(72 (73 (74 (75 (76 (77	Medium/heavy truck or Pedestrian Cyclist or cycle Other nonmotorist or co Vehicle occupant Animal Train	onveyance		
(41) Tree (42) Tree (43) Shru (44) Emb (45) Brea Nonbreakaw (50) Pole (51) Pole	e (< 10 cm in diameter) e (> 10 cm in diameter) be (> 10 cm in diameter) be between the common terms of th	ter)	(72 (73 (74 (75 (76 (77 (78	Medium/heavy truck or Pedestrian Cyclist or cycle Other nonmotorist or co Vehicle occupant Animal Train Trailer, disconnected in	onveyance		
(41) Tree (42) Tree (43) Shru (44) Emb (45) Brea Nonbreakaw (50) Pole (51) Pole (52) Pole	e (< 10 cm in diameter) e (> 10 cm in diameter) be (> 10 cm in diameter) be between two controls and the controls are post (any diameter) between two controls are post (< 10 cm in diameter)	ter)	(72 (73 (74 (75 (76 (77 (78	Medium/heavy truck or Pedestrian Cyclist or cycle Other nonmotorist or co Vehicle occupant Animal Train Trailer, disconnected in Object fell from vehicle	transport in-transport		
(41) Tree (42) Tree (43) Shru (44) Emb (45) Brea Nonbreakaw (50) Pole (51) Pole (52) Pole (53) Pole	e (< 10 cm in diameter) e (> 10 cm in diameter) ubbery or bush pankment akaway pole or post (any diameter) e or post (< 10 cm in diameter) e or post (> 10 cm but < 30 cm in diameter) e or post (> 30 cm in diameter) e or post (diameter unknown)	ter)	(72 (73 (74 (75 (76 (77 (78 (79 (88	Medium/heavy truck or Pedestrian Cyclist or cycle Other nonmotorist or co Vehicle occupant Animal Train Trailer, disconnected in Object fell from vehicle Other nonfixed object (s	transport in-transport specify):		
(41) Tree (42) Tree (43) Shru (44) Emb (45) Brea Nonbreakaw (50) Pole (51) Pole (52) Pole (53) Pole	e (< 10 cm in diameter) e (> 10 cm in diameter) ubbery or bush pankment akaway pole or post (any diameter) ay Pole or Post e or post (< 10 cm in diameter) e or post (> 10 cm but < 30 cm in diameter) e or post (> 30 cm in diameter) e or post (diameter unknown)	ter)	(72 (73 (74 (75 (76 (77 (78 (79 (88	Medium/heavy truck or Pedestrian Cyclist or cycle Other nonmotorist or co Vehicle occupant Animal Train Trailer, disconnected in Object fell from vehicle	transport in-transport specify):		
(41) Tree (42) Tree (43) Shru (44) Emb (45) Brea Nonbreakaw (50) Pole (51) Pole (52) Pole (53) Pole (54) Con (55) Imp	e (< 10 cm in diameter) e (> 10 cm in diameter) ubbery or bush pankment akaway pole or post (any diameter) e or post (< 10 cm in diameter) e or post (> 10 cm but < 30 cm in diameter) e or post (> 30 cm in diameter)	ter)	(72 (73 (74 (75 (76 (77 (78 (79 (88	Medium/heavy truck or Pedestrian Cyclist or cycle Other nonmotorist or co Vehicle occupant Animal Train Trailer, disconnected in Object fell from vehicle Other nonfixed object Unknown nonfixed object	transport in-transport specify):		
(41) Tree (42) Tree (43) Shru (44) Emb (45) Brea Nonbreakaw (50) Pole (51) Pole (52) Pole (53) Pole (54) Con (55) Imp	e (< 10 cm in diameter) e (> 10 cm in diameter) ubbery or bush pankment akaway pole or post (any diameter) ay Pole or Post e or post (< 10 cm in diameter) e or post (> 10 cm but < 30 cm in diameter) e or post (> 30 cm in diameter) e or post (diameter unknown)	ter)	(72 (73 (74 (75 (76 (77 (78 (79 (88	Medium/heavy truck or Pedestrian Cyclist or cycle Other nonmotorist or co Vehicle occupant Animal Train Trailer, disconnected in Object fell from vehicle Other nonfixed object (s	transport in-transport specify):		

	PRECRASH ENVIRONMENTAL DATA	25	Roadway Surface Condition	1
		25.	(1) Dry	<u>-</u>
19.	Relation To Interchange Or Junction		(2) Wet	
	(0) Non-interchange area and non-junction		(3) Snow or slush	1
	(1) Interchange area related			
			(4) Ice	
	Non-Interchange junctions		(5) Sand, dirt, or oil	
	(2) Intersection related	ł	(8) Other (specify):	:
	(3) Driveway, alley access related		(9) Unknown	
	(4) Other junction (specify)	l		\neg
		l 26.	Light Conditions	5
	(5) Unknown type of junction		(1) Daylight	_
		1	(2) Dark	
	(9) Unknown		(3) Dark, but lighted	
			(4) Dawn	
		1	(5) Dusk	
20.	Trafficway Flow		(9) Unknown	1
	(0) Not physically divided (two way traffic)	l	(5) Chanovii	I
	(1) Divided trafficway-median strip without	l		\sim
	positive barrier	27	Atmospheric Conditions	\cup $ $
	(2) Divided trafficway-median strip with positive	27.	(0) No adverse atmospheric-related driving	-
	barrier	İ	conditions	
	(3) One way traffic	ŀ	(1) Rain	
	(9) Unknown		(2) Sleet/hail	
	7	l	(3) Snow	
	$\boldsymbol{\prec}$			
21.	Number Of Travel Lanes	1	(4) Fog	
	(1) One		(5) Rain and fog	
	(2) Two		(6) Sleet and fog	
	(3) Three		(7) Other (e.g., smog, smoke, blowing sand of the start o	or
	(4) Four		dust, etc.) (specify):	
	(5) Five	1	(9) Unknown	
	(6) Six		(9) Unknown	\sim
	(7) Seven or more	مدا	Traffic Control Device	\cup
	(9) Unknown	20.		
	2	l	(0) No traffic control(s)	
22	Banduna Alimament		(1) Traffic control signal (not RR crossing)	
22.	Roadway Alignment (1) Straight	1	Barrilatar:	
	• •		Regulatory	
	(2) Curve left	ļ.	(2) Stop sign	
	(3) Curve left	1	(3) Yield sign	
	(9) Unknown	1	(4) School zone sign(5) Other regulatory sign (specify):	
		İ	(5) Other regulatory sign (specify):	
23.	Roadway Profile	1	(6) Warning sign (not RR crossing)	
	(1) Level		(7) Unknown sign	
	(2) Uphill grade (>2%)			
	(3) Hill crest	l	(8) Miscellaneous/other controls including RF	ı
	(4) Downhill grade (>2%)		controls (specify):	
	(5) Sag	1	(9) Unknown	
	(9) Unknown		(9) Unknown	
	\sim			
	Residence Conference To the	200	Troffic Control Daviso Eventioning	\mathcal{O}
24.	Roadway Surface Type	29	. Traffic Control Device Functioning	
	(1) Concrete		(0) No traffic control device	
	(2) Bituminous (asphalt)		(1) Traffic control device not functioning	
	(3) Brick or block		(specify):	
	(4) Slag, gravel, or stone		(2) Traffic control device functioning properly	
	(5) Dirt	1		y
	(8) Other (specify):	1	(9) Unknown	
	(9) Unknown	1		

National Accident Sampling System-Crashworthiness Data System: General Vehicle Form

Mational Accide	ant camping dystem-ordenworthmess be	ita Oy	System: General Vernete Form Fage 5				
	OCCUPANT RELATED	44.	4. Vehicle Cargo Weight				
			Code weight to nearest 10 kilograms. (000) Less than 5 kilograms (454) 4,536 kilograms or more (999) Unknown				
38. Number o (00-96) C for th	f Occupants This Vehicle ode actual number of occupants his vehicle		Source: kgs	(97) 97 or (99) Unkn 39. Number o		45.	5. Rollover (00) No rollover (no overturning)
	AIR BAG RELATED	(Rollover (primarily about the longitudinal axis) (01-16) Code the number of quarter turns				
40 Is this an	AOPS Vehicle?	1	(17) Rollover, 17 or more quarter turns (specify):				
(O) No (i (1) Yes - (2) VIN (i (3) VIN (i (4) VIN (i	ncludes unknown) researcher determined determined air bag system determined automatic (passive) belts determined air bag and automatic sive) belts	46.	(98) Rolloverend-over-end (i.e., primarily about the lateral axis) (99) Rollover (overturn), details unknown 6. Rollover Initiation Type (00) No rollover				
(0) Not e	Deployment, First Seat Frontal equipped or not available ir bags deployed		(01) Trip-over (02) Flip-over (03) Turn-over (04) Climb-over (05) Fall-over				
(2) Drive	Bag Vehicle or air bag deployed or air bag, unknown if deployed		(06) Bounce-over (07) Collision with another vehicle (08) Other rollover initiation type specify):				
(4) Drive (5) Pass (6) Drive (7) Drive	tir Bag Vehicle or side only deployed enger side only deployed or and passenger side deployed or and passenger side unknown if	47.	(98) Rolloverend-over-end (99) Unknown rollover initiation type 7. Location of Rollover Initiation				
(9) Unkr	ag(s) deployed, details unknown lown		(0) No rollover (1) On roadway (2) On shoulder—paved (3) On shoulder—unpaved				
Seat From (0) Not e	Deployment, Other Than First tal equipped with an "other" air bag byed during accident (as a result of		 (4) On roadside or divided trafficway median (8) Rolloverend-over-end (9) Unknown 				
(3) Deple	oyed inadvertently just prior to accident oyed, details unknown		8. Rollover Initiation Object Contacted (Note: Applicable codes on back of page)				
durin explo	oyed as a result of a noncollision event g accident sequence (e.g., fire, psion, electrical) nown if deployed	49.	9. Location on Vehicle Where Initial Principal Tripping Force Is Applied (0) No rollover (1) Wheels/tires				
(7) Nonc (9) Unkr	deployed nown		(2) Side plane (3) End plane (4) Undercarriage				
Specify type	e of "other" air bag present:		(5) Other location on vehicle (specify):				
			(6) Non-contact rollover forces (specify):				
V	EHICLE WEIGHT ITEMS		(8) Rolloverend-over-end (9) Unknown				
	le Curb Weight	50.	O. Direction of Initial Roll (0) No rollover (1) Roll right - primarily about the longitudinal axis				
(612) (999)	Less than 454 kilograms 6,124 kilograms or more Unknown 0 20 lbs X .4536 = 13 70 kgs		 (2) Roll left - primarily about the longitudinal axis (8) Rolloverend-over-end (9) Unknown roll direction 				
Source			(2) 22 (a. 22				

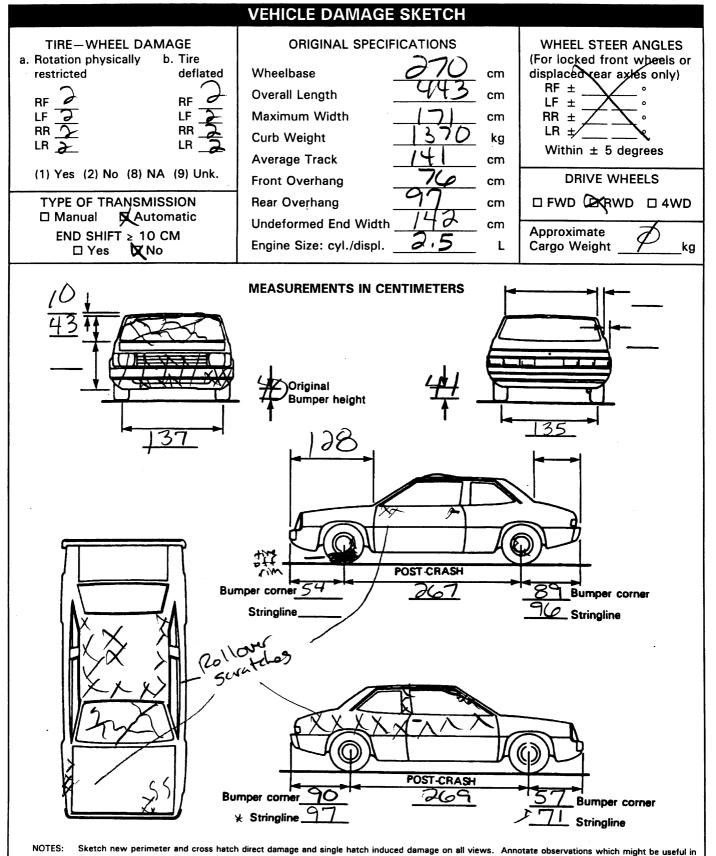
CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

, or other
1, 01 011101
t in-transport
or in transport
ort
sport
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7.
)

National Highway To Administration	raffic Safety	EX	IERIOR	VEHIC	CLE F	ORM	NA.	CRASE	CCIDENT IWORTHIN	SAMPLING IESS DATA	3 SYSTEM A SYSTEM
1. Primary S	ampling Unit Nu	mber .		<u>≠</u> 3.	Vehicle	Numbe	er				Σ
2. Case Num	nber - Stratum	4	O1E	_							
		,	VEHICLE	IDENTI	FICATI	ON					
VIN WT	ABF (specify): P	+31 5MN	9 PE		Vehicle	Model (specify):	32	Model Y	ear	3
			L	OCATO	R						
	nd of the damag undamaged axl			ehicle's	damage	ed cente	er point	or bum	per corn	er for e	nd
Specific Impact N		of Direct Dama	_			of Field L			Location o	f Max Cru	ush
)	Beg LF E	SC → 390	cm Right	BO	<u> </u>	\mathcal{T} σ	\sim		<u> </u>	<u></u>	
		· · ·		·							
2	\vdash	-011-	OVE SH PROF								
sill, d Mea impa Free the i	tify the plane at etc.) and label ac sure C1 to C6 fracts. space value is condividual C locataper, etc. Rec	djustments of com driver to defined as the tions. This	e.g., free so passenger ne distance may includ	space). side in between the fol	front or n the ba lowing:	rear imp seline a bumper	nd the c	nd rear to original umper t	to front	in side ntour ta	ıken at
Use	as many lines/co	,		describ	e each c	lamage	profile.				
	lane of Impact Measurements	Direct D Width (CDC)	Max Crush	Field L	C,	C ₂	C ₃	C ₄	C₅	C ₆	±D
1 7	SUMPES.	39	3	142	3	2	1	0	0	0	-53
·											
) K	Rollover	106	12	Y-	10			V	ev		

ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	106.3 inches	x 2.54 =	270cm
Overall Length	174.5 inches	x 2.54 =	443 cm
Maximum Width	067.3 inches	x 2.54 =	171 cm
Curb Weight	03,020 pounds	x .4536 =	1.370 kg
Average Track	055.7 inches	x 2.54 =	<u>/4/</u> cm
Front Overhang	inches	x 2.54 =	<u>676</u> cm
Rear Overhang	inches	x 2.54 =	097cm
Undeformed End Width	inches	x 2.54 =	142 cm
Engine Size: cyl./displ.	сс	x .001 =	<u>ا 2.5</u>
•	CID	x .0164 =	L



reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.). If pulling trailer, sketch type of trailer and damage

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

received on the back of this page.

			CDC-14	/ODVCHEE	т			
			CDC V	VORKSHEE				
			CODES FOR C	BJECT CONT	ACTED			
(01-30)	— Vehicle Nu	ımber		(57)	Fence			
(0.00)					Wall			
Noncol	lision				Building			
		ollover (exclude:	s end-over-en		Ditch or	culvert		
	Rollover-end				Ground			
,	Fire or explos				Fire hydr	ant		
	Jackknife				Curb			
		it damage (spec	ifv):		Bridge			
(00)		it damage (opeo	,,.			ed object (s	pecify):	
(36)	Noncollision i	njury						
		ision (specify):		(69)	Unknow	n fixed obje	ct	
(39)	Noncollision -	– details unkno	wn			nfixed Obje		
				(70)		er car, light		or other
	n With Fixed C			.=		ot in-transp		
	Tree (≤ 10 cm						or bus not	in-transport
	•	m in diameter)			Pedestria			
	Shrubbery or	bush			Cyclist o			
(44)	Embankment			(74)	Other no	nmotorist o	r conveyand	ce
(45)	Breakaway po	ole or post (any	diameter)		Vehicle of Animal	occupant		
Nonbro	akaway Pole o	r Post			Train			
		rost ≤ 10 cm in diam	otor)			isconnected	l in transpo	
		> 10 cm but s				ell from vehi		
(51)	diameter)	> 10 cm but s	30 Cili III			nfixed object		
(52)		> 30 cm in diar	meter)	(00)	Other no	illixed Objet	ot (specify).	
		diameter unknov		(89)	Unknow	n nonfixed o	bject	•
(54)	Concrete traf	fic harrier		(98)	Other ev	ent (specify	۸.	
	Impact attenu			(30)	Other ev	ont (specify		
(56)		barrier (includes	-	(99)	Unknow	n event or o	bject	
	(specify)							
	•	DEFORMA	TION CLASSI	FICATION BY		UMBER		
A : d		(1) (2)			(4)	(5)	(6)	
Accident Event		(1) (2) Direction	incremental	(3) L	Specific ongitudinal	Specific Vertical or	(6) Type of	(7)
Sequence	e Object	of Force	Value of		or Lateral	Lateral	Damage	Deformation
Number		(degrees)	Shift	Location	Location	Location	Distribution	Extent
\sim	\overline{a}	. <2	06					~
O_{I}	$\cup \sigma$	130	OO	<u> </u>	<u></u>	E	1/	O(1)
								
								
								
02	31	000	00	T	$\overline{\lambda}$	\mathcal{D}		\bigcirc
<u></u>			<u> </u>			-		<u></u>
				-	***************************************			
								
				·				

		COLLISION	DEFORMA	TION CLAS	SIFICATIO	N	
HIGHEST D	ELTA "V"						
Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
4. <u>0</u> 2	5. <u>3</u>	6. <u>O</u> O	7	8. <u>Y</u>	<u>Q</u> e	10.	11.02
Second Hig	ghest Delta "V'	•				E	-
12. 🔼 📗	13.02	14. <u>0</u>	15.	16.	17. <u>E</u>	18.	19.
		CRUS	H PROFILE	IN CENTIM	ETERS		
		ile for the dan	nage described below. (ALL M	in the CDC(s)	above should IS ARE IN CEN	NTIMETERS.) ; 2	od sa Las sandares na necessaria na Reviena
HIGHEST							22
20. L ———	21. 				C ₅		22.
Second Hi	ghest Delta "V	n					
23. L	24. 			C ₄	C ₅	C ₆	25.
142	<u></u>	007	001	000	000 0	<u> </u>	053
(Coded impact (250) (998) (999)	ormed End Widtl I when highest s is an end plane Code to the ne. 250 centimeter No highest seve Unknown	severity impact.) arest centimetors or more		(650) (999) 1 O	al Average Tra	ters or more $\times 2.54 = 2$	Ocentimeters
(For high	Damage Width ghest severity in Code to the ne 250 centimeter Unknown	arest centimet	<u> </u>	(999)	Code to the nearest centing 185 centimer Unknown inches	ters or more	centimeters

		_			FUEL SYSTEM
30. Are CDCs but Not C Automate (0) No (1) Yes	Coded on The		36.	Loca (0) (1) (2)	ntion of Fuel Tank-1 Filler Cap Ition of Fuel Tank-2 Filler Cap No fuel tank On back plane Aft of center of the rear wheels (rear axle) on left side plane
Disposition (O) Not to (1) Towe (9) Unknown 32. Is This A And/Or A (O) No po	owed due to vehicle damage and due to vehicle damage own Multi-Stage Manufactured Vehicle Certified Altered Vehicle? Ost manufacturer modifications post manufacturer modifications			(4) (5) (6) (7) (8) (9)	Aft of center of the rear wheels (rear axle) on right side plane Forward of center of the rear wheels (rear axle) on left side plane Forward of center of the rear wheels (rear axle) on right side plane Over the center of the rear wheels (rear axle) on left side plane Over the center of the rear wheels (rear axle) on right side plane Other (specify): Unknown
PLAC	de photograph of CERTIFICATION ARD in case report) own if vehicle is modified			(0) (1) (2) (9)	of Fuel Tank-2 No fuel tank (electrical vehicle) Metallic Non-metallic Unknown
	FIRE OCCURRENCE		39.	Loca	ation of Fuel Tank-1
(2) Exhau (3) Fuel 1 syste (4) Engin (5) Cargo (6) Instru (7) Passe	occurred r r r r r r r r r r r r r r r r r r		41.	Loca (0) (1) (2) (3) (4) (5) (6) (7) (2) (3) (4) (5) (6)	ation of Fuel Tank-1 ation of Fuel Tank-2 No fuel tank Aft of center of the rear wheels (rear axle) centered Aft of center of the rear wheels (rear axle) left side Aft of center of the rear wheels (rear axle) right side Forward of center of the rear wheels (rear axle) centered Forward of center of the rear wheels (rear axle) left side Forward of center of the rear wheels (rear axle) right side Over center of the rear wheels (rear axle) right side Over center of the rear wheels (rear axle) right side Over center of the rear wheels (rear axle) Other (specify): Unknown hage to Fuel Tank-1 hage to Fuel Tank-2 No fuel tank No damage to fuel tank Deformed, no seam failure Punctured Lacerated (ripped) Abraded (scraped) Filler neck separation from the fuel tank Other damage (specify): Unknown

		· · · · · · · · · · · · · · · · · · ·		
43.	Leakage Location of Fuel System-1	Two	nis Vehicle Equipped With More Than	
44.	Leakage Location of Fuel System-2	(0)	No (one or two tanks only)	
	(0) No fuel tank	.,		
	(1) No fuel leakage		- More Than Two Tanks	
		(1)	Yes no damage to any tank or filler	
	Primary Area Of Leakage		cap and no fuel system leakage	
	(2) Tank	(2)	Yes no damage to any tank or filler	
	(3) Filler neck	1	cap but there is fuel system leakage	
	(4) Cap	1	(specify leakage location):	
	(5) Lines/pump/filter			
l	(6) Vent/emission recovery	(3)	Yes damage to an additional tank or	
	(8) Other (specify):	ŀ	filler cap and there is fuel system leakage	
	(9) Unknown		(specify the following):	
1	~ 1		Type of tank	
			Tank location	_
45.	Fuel Type-1	Ì	Filler cap location	
			Tank damage	
46.	Fuel Type-2		Location of leakage	
			Type of fuelUnknown if more than two tanks	_
	Single Fuel Type	(9)	Unknown if more than two tanks	
	(00) No fuel tank	ľ		
	(01) Gasoline	<u> </u>		
	(O2) Diesel			
	(03) CNG (Compressed Natural Gas)		COMMENTS	
	(04) LPG (Liquid Petroleum Gas) also	1		
	known as Propane			
	(05) LNG (Liquid Natural Gas)			
	(06) Methanol (M100 or M85)			
İ	(07) Ethanol (E100 or E85)	ĺ		
	(08) Other (Hydrogen or others) (specify):			
	Electric Powered or Electric/Solar Powered Vehicles (10) Lead Acid Battery (11) Nickel-Iron Battery (12) Nickel-Cadmium Battery (13) Sodium Metal Chloride Battery (14) Sodium Sulfur Battery (18) Other (Specify): (98) Other Hybrid (specify): (99) Unknown fuel type			
	*** STOP: IF THE CDS APPLICAB	LE VEHI	CLE WAS NOT TOWED ***	

*** STOP: IF THE CDS APPLICABLE VEHICLE WAS NOT TOWED ***

(GV10=0)

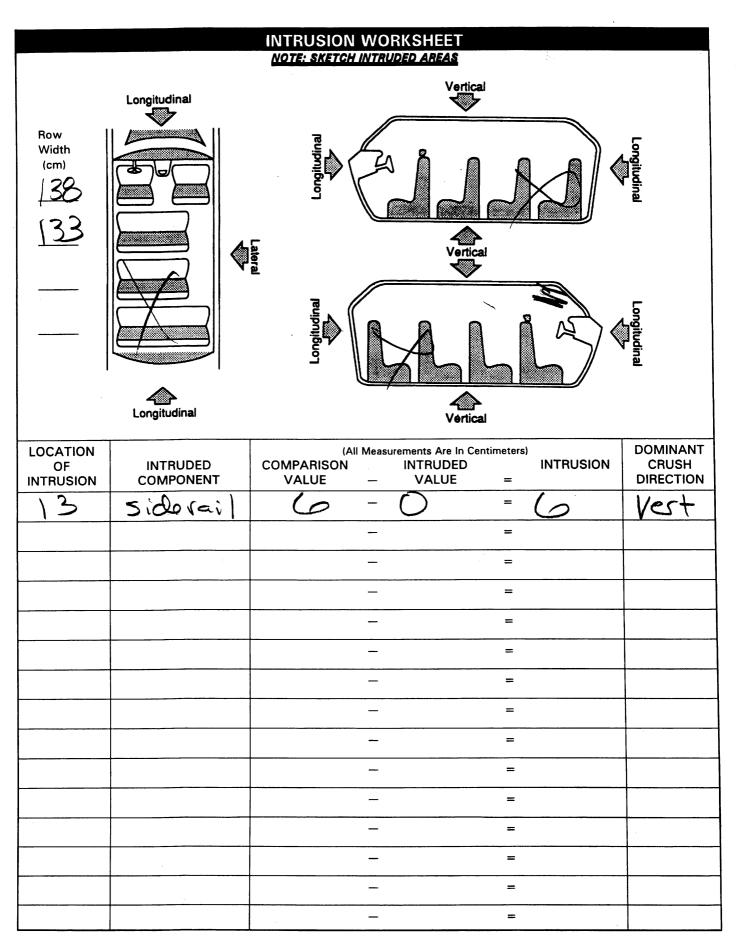
DO NOT COMPLETE THE INTERIOR VEHICLE FORM.

INTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

(i) Windshield (i) Door/fatch (back door) (i) Roof (i) Roof glass (i) Windshield and door (side) (ii) Windshield and door (side) (iii) Windshield and door (side) (iii) Windshield and side window (iii) Door and side window (iii) Door and side window (iii) Door and side window (iii) Door and side window (iii) Door and side window (iii) Door and side window (iii) Door and side window (iii) Door and side window (iii) Door and side window (iii) Door and side window (iii) Door and side window (iii) Door and side window (iii) Door/gate/hatch are open during collision (iii) Door/gate/hatch remained closed and operational (iii) Door/gate/hatch remained closed and operational (iii) Door/gate/hatch remained closed and operational (iii) Door/gate/hatch remained closed and operational (iii) Door/gate/hatch remained closed and operational (iii) Door/gate/hatch remained closed and operational (iii) Door/gate/hatch remained closed and operational (iv) Door/gate/hatch remained closed and	Administration	CRASHWORTHINESS DATA SYSTE
2. Case Number - Stratum 3. Vehicle Number INTEGRITY 4. Passenger Compartment Integrity (00) No integrity loss (00) No integrity loss (00) No integrity loss (10) No integrity loss (11) AS-1 — Laminated (12) AS-2 — Tempered with after market tint (15) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market tint (16) AS-3 — Tempered with after market (16) AS-3 — Tempered with after market (16) AS-3 — Tempered with after market (16) AS-3 — Tempered with after market (16) AS-3 — Tempered with after market (17) AS-3 — Tempered with after market (17) AS-3 — Tempered with after market (17) AS-3 — Tempered with after market (17) AS-3 — Tempered with after market (17) AS-3 — Tempered with after market (17) AS-3 — Tempered with after market (17) AS-3 — Tempered with after market (17) AS-3 — Tempered with after market (17) AS-3 — Tempered with after market (17) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with after market (18) AS-3 — Tempered with a	1 Billion Consuling Unit Number	GLAZING
INTEGRITY 4. Passenger Compartment Integrity (00) No integrity loss Yes, Integrity Was Lost Through (11) Windshield (12) Door (side) (13) Door/hatch (back door) (14) Roof (15) Roof glass (16) Side window (17) Rear window (backlight) (18) Roof and roof glass (19) Windshield and door (side) (10) Windshield and door (side) (11) Windshield and door (side) (11) Windshield and door (side) (11) Side and rear window (side window (18) Door and side window (18) Other combination of above (specify): (19) Unknown Door, Tailgate or Hatch Opening 5. LF	1. Primary Sampling Offit Number	Type of Window/Windshield Glazing
3. Vehicle Number 4. Passenger Compartment Integrity (i) No integrity loss (ii) No integrity loss (iii) No integrity loss (iii) No integrity loss (iii) Windshield (iii) Windshield (iii) Windshield (iii) Windshield (iii) Olis Roof (side) (iii) Roof (side) (iiii) Roof (side) (iiii) Windshield and cord (iiii) Roof (side) (iiii) Windshield and door (side) (iiii) Windshield and door (side) (iiii) Windshield and door (side) (iiii) Windshield and door (side) (iiii) Windshield and door (side) (iiii) Windshield and door (side) (iiii) Windshield and door (side) (iiii) Windshield and door (side) (iiii) Windshield and door (side) (iiii) Windshield and door (side) (iiii) Windshield and door (side) (iiiii) Windshield and side window (iiii) Door and side window (iiii) Door and side window (iiii) Windshield and side window (iiii) Windshield and side window (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	2. Case Number - Stratum	15. WS 16. LF 2 17. RF 18. LR 19. RR
4. Passenger Compartment Integrity 6. Passenger Compartment Integrity 7. Ves. Integrity Was Lost Through 8. Ves. Integrity Was Lost Through 9. Ves. Integrity Was Lost Through 9. Ves. Integrity Was Lost Through 9. Ves. Integrity Was Lost Through 9. Ves. Integrity Was Lost Through 9. Ves. Integrity Was Lost Through 9. Ves. Integrity Was Lost Through 9. Ves. Integrity Was Lost Through 9. Ves. Integrity Was Lost Through 9. Ves. Integrity Was Lost Through 9. Ves. Integrity Was Lost Through 9. Ves. Ves. Ves. Ves. Ves. Ves. Ves. Ves	3. Vehicle Number	
4. Passenger Compartment Integrity (00) No integrity loss Yes, Integrity Was Lost Through (01) Windshield (02) Door (side) (03) Door/hatch Iback door) (04) Roof (05) Roof glass (08) Side window (07) Rear window (backlight) (08) Roof and roof glass (09) Windshield and door (side) (10) Windshield and door (side) (11) Windshield and door (side) (10) Windshield and roof (11) Side and rear window (side window (13) Door and side window (13) Door and side window (14) Door, Tailgate or Hatch Opening 5. LF 6. RF 7. LR 8. RR 9. TG/H (10) No door/gate/hatch remained closed and operational (2) Door/gate/hatch painmed shut (3) Other (specify): (3) Unknown Glazing removed prior to accident (3) No glazing (1) Fixed (2) Closed (3) Partially opened (4) Fully opened (4) Fully opened (4) Fully opened (4) Fully opened (5) Glazing removed prior to accident (9) Unknown Glazing Damage from Impact Forces (3) Ray 3. RF 3. RR 34. LR 35. RR (36. BL 37. Roof 38. Other (10) No glazing (11) Roof-gate/hatch area open during collision (3) Door/gate/hatch area open during collision (3) Other (specify): (4) Unknown Glazing in place and racked from impact forces (3) Glazing in place and racked from impact forces (3) Glazing in place and racked from impact forces (3) Glazing in place and racked from impact forces (3) Glazing in place and racked from impact forces (3) Glazing in place and racked from impact forces (3) Glazing in place and racked from impact forces (3) Glazing in place and racked from impact forces (3) Glazing out-of-place (tracked or not) and not holed impact forces (3) Glazing in place and racked from impact forces (3) Glazing out-of-place (tracked or not) and not holed impact forces (3) Glazing in place and racked by occupant but no glazing damage (4) Door structure failure due to damage (5) Door support (16., pliffs, sill, roof side rail, etc.] failure due to damage (6) Other failure specify!	INTEGRITY	* * -
Door, Tailgate or Hatch Opening 5. LF 6. RF 7. LR 8. RR 9. TG/H (0) No door/gate/hatch remained closed and operational (1) Door/gate/hatch came open during collision (3) Door/gate/hatch came open during collision (3) Door/gate/hatch immed shut (8) Other (specify): (9) Unknown Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 * 2, Then code Ø 10. LF 11. RF 12. LR 13. RR 14. TG/H Door, Tailgate or Hatch Came Open During Collision (1) Door operational (no damage) (2) Latch/striker failure due to damage (3) Hinge failure due to damage (4) Door structure failure due to damage (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage (6) Latch/striker and hinge failure due to damage (8) Other failure (specify): Glazing out-of-place and holed from impact forces (6) Glazing germoved prior to accident (9) Unknown if damaged (1) No glazing (1) No glazing (2) Glazing permoved prior to accident (9) Unknown if damaged (1) No glazing (1) No glazing (2) Glazing out-of-place out-of-place out-of-place out-of-place out-of-place out-of-place or ont) by occupant contact (4) Glazing out-of-place by occupant contact (5) Glazing out-of-place by occupant contact (6) Glazing out-of-place by occupant contact (6) Glazing out-of-place by occupant contact (7) Glazing out-of-place by occupant contact (8) Other failure (specify):	(00) No integrity loss Yes, Integrity Was Lost Through (01) Windshield (02) Door (side) (03) Door/hatch (back door) (04) Roof (05) Roof glass (06) Side window (07) Rear window (backlight) (08) Roof and roof glass (09) Windshield and door (side) (10) Windshield and roof (11) Side and rear window (side window and backlight) (12) Windshield and side window (13) Door and side window (98) Other combination of above (specify):	(1) AS-1 — Laminated (2) AS-2 — Tempered (3) AS-3 — Tempered-tinted (original) (4) AS-2 — Tempered-with after market tint (5) AS-3 — Tempered-tinted (with additional after market tint) (6) AS-14 — Glass/Plastic (7) Glazing removed prior to accident (8) Other (specify): (9) Unknown Window Precrash Glazing Status 23. WS 24. LF 25. RF 26. LR 27. RR 28. BL 29. Roo 30. Other (0) No glazing (1) Fixed (2) Closed (3) Partially opened (4) Fully opened (7) Glazing removed prior to accident
(1) Door/gate/hatch came open during collision (2) Door/gate/hatch came open during collision (3) Door/gate/hatch jammed shut (8) Other (specify): (9) Unknown Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then code Ø 10. LF 11. RF 12. LR 13. RR 14. TG/H Door, Tailgate or Hatch Came Open During Collision (1) Door operational (no damage) (2) Latch/striker failure due to damage (3) Hinge failure due to damage (4) Door structure failure due to damage (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage (6) Latch/striker and hinge failure due to damage (6) Other failure (specify): (0) No glazing (1) No glazing damage from impact forces (3) Glazing in place and holed from impact forces (4) Glazing out-of-place and holed from impact forces (5) Glazing out-of-place and holed from impact forces (6) Glazing permoved prior to accident (9) Unknown if damage (9) Unknown if damage (1) No glazing (1) No glazing (1) No glazing (2) Glazing Damage from Occupant Contact (3) WS 40. LF 41. RF 42. LR 43. RF (4) BL 45. Roof 46. Other (5) Glazing contacted by occupant but no glazing damag (6) Latch/striker and hinge failure due to damage (6) Latch/striker and hinge failure due to damage (6) Other failure (specify): (6) Ulkinown (7) Volume and cracked from impact forces (8) Glazing out-of-place and holed from impact forces (9) Glazing out-of-place and holed from impact forces (9) Glazing out-of-place (cracked or not) and not holed impact forces (9) Unknown if damage (9) Unknown	5. LF 6. RF 7. LR 8. RR 9. TG/H	Glazing Damage from Impact Forces 31. WS 32. LF 33. RF 34. LR 35. RR
Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then code Ø 10. LF 11. RF 12. LR 13. RR 14. TG/H (0) No door/gate/hatch or door not opened Door, Tailgate or Hatch Came Open During Collision (1) Door operational (no damage) (2) Latch/striker failure due to damage (3) Hinge failure due to damage (4) Door structure failure due to damage (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage (6) Latch/striker and hinge failure due to damage (8) Other failure (specify): (9) Unknown if damaged Glazing Damage from Occupant Contact 39. WS 40. LF 41. RF 42. LR 43. RF 44. BL 45. Roof 46. Other (0) No glazing (1) No occupant contact to glazing (2) Glazing contacted by occupant but no glazing damag (3) Glazing in place and cracked by occupant contact (4) Glazing in place and hole occupant contact (5) Glazing out-of-place (cracked or not) by occupant contact (6) Glazing out-of-place by occupant contact and hole occupant contact	(2) Door/gate/hatch came open during collision (3) Door/gate/hatch jammed shut (8) Other (specify):	 (0) No glazing (1) No glazing damage from impact forces (2) Glazing in place and cracked from impact forces (3) Glazing in place and holed from impact forces (4) Glazing out-of-place (cracked or not) and not holed from impact forces (5) Glazing out-of-place and holed from impact forces
On No door/gate/hatch or door not opened Door, Tailgate or Hatch Came Open During Collision (1) Door operational (no damage) (2) Latch/striker failure due to damage (3) Hinge failure due to damage (4) Door structure failure due to damage (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage (6) Latch/striker and hinge failure due to damage (8) Other failure (specify): (9) Unknown	Opening in Collision. If IV05-IV09 ≠ 2, Then code Ø	(7) Glazing removed prior to accident
Door, Tailgate or Hatch Came Open During Collision (1) Door operational (no damage) (2) Latch/striker failure due to damage (3) Hinge failure due to damage (4) Door structure failure due to damage (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage (6) Latch/striker and hinge failure due to damage (8) Other failure (specify): (9) Unknown	10. LF 11. RF 12. LR 13. RR 14. TG/H	
(1) Door operational (no damage) (2) Latch/striker failure due to damage (3) Hinge failure due to damage (4) Door structure failure due to damage (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage (6) Latch/striker and hinge failure due to damage (8) Other failure (specify): (0) No glazing (1) No occupant contact to glazing (2) Glazing contacted by occupant but no glazing damag (3) Glazing in place and cracked by occupant contact (4) Glazing in place and holed by occupant contact (5) Glazing out-of-place (cracked or not) by occupant contact and not holed by occupant contact (6) Glazing out-of-place by occupant contact and hole occupant contact	(O) No door/gate/hatch or door not opened	
(7) Glazing removed prior to accident (8) Glazing disintegrated by occupant contact	 (1) Door operational (no damage) (2) Latch/striker failure due to damage (3) Hinge failure due to damage (4) Door structure failure due to damage (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage (6) Latch/striker and hinge failure due to damage 	 (0) No glazing (1) No occupant contact to glazing (2) Glazing contacted by occupant but no glazing damage (3) Glazing in place and cracked by occupant contact (4) Glazing in place and holed by occupant contact (5) Glazing out-of-place (cracked or not) by occupant contact and not holed by occupant contact (6) Glazing out-of-place by occupant contact and holed by occupant contact (7) Glazing removed prior to accident

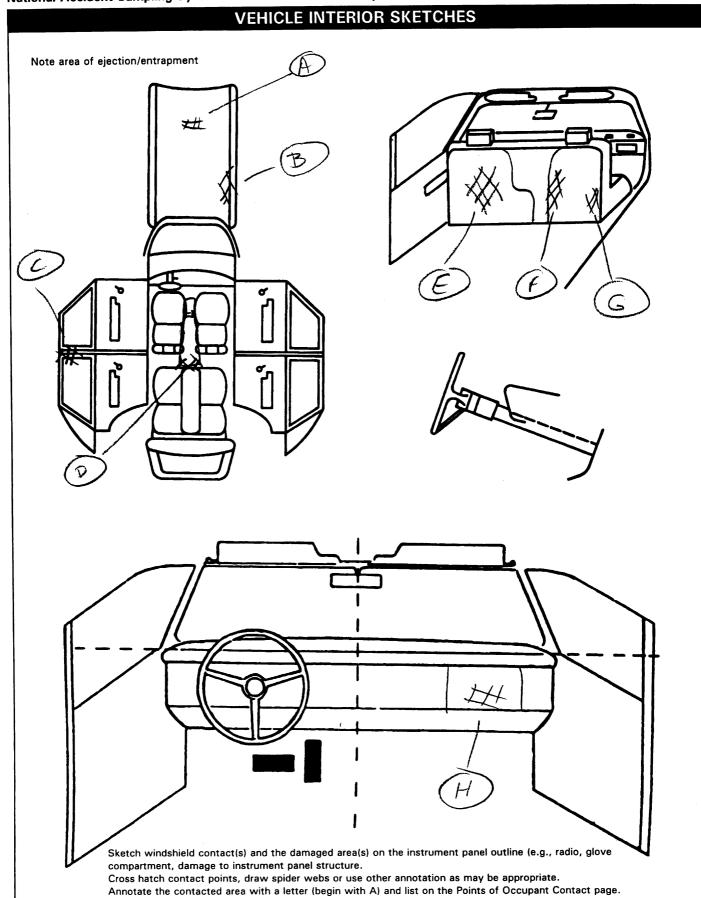
(9) Unknown if contacted by occupant



			UCCU	PANT AR	REAINTRUSION
Note	: If no intrusions	s, leave variable	es IV47-IV	86 blank.	INTRUDING COMPONENT
	Location of Intrusion	Intruding I	Magnitude of Intrusion	Dominant Crush Direction	Interior Components (01) Steering assembly (02) Instrument panel left
1st	47. 3	48	49	50	(03) Instrument panel center (04) Instrument panel right (05) Toe pan (06) A (A1/A2)-pillar (07) B-pillar
2nd	51	52	53	54	(08) C-pillar (09) D-pillar (10) Side panel - forward of the A1/A2-pillar (11) Door panel (side)
3rd	55	56	57	58	(12) Side panel - rear of the B-pillar (13) Roof (or convertible top) (14) Roof side rail (15) Windshield
4th	59	60	61	62	(16) Windshield header (17) Window frame (18) Floor pan (includes sill) (19) Backlight header
5th	63	64	65	66	(20) Front seat back (21) Second seat back (22) Third seat back (23) Fourth seat back
6th	67	68	69	70	 (24) Fifth seat back (25) Seat cushion (26) Back door/panel (e.g., tailgate) (27) Other interior component (specify):
7th	71	72	73	74	Exterior Components
8th	75	76	77	78	(30) Hood (31) Outside surface of this vehicle (specify): (32) Other exterior object in the environment
9th	79	80	81	82	(specify):(33) Unknown exterior object (97) Catastrophic (98) Intrusion of unlisted component(s)
10th	83	84	85	86	(specify): (99) Unknown
LOCA	TION OF INTR	USION			MAGNITUDE OF INTRUSION (1) > 3 centimeters but < 8 centimeters
Se-	ont Seat (11) Left (12) Middle (13) Right cond Seat (21) Left (22) Middle	(98)	.eft ⁄Iiddle	losed	 (1) ≥ 3 centimeters but < 8 centimeters (2) ≥ 8 centimeters but < 15 centimeters (3) ≥ 15 centimeters but < 30 centimeters (4) ≥ 30 centimeters but < 46 centimeters (5) ≥ 46 centimeters but < 61 centimeters (6) ≥ 61 centimeters (7) Catastrophic (9) Unknown
Thi	(23) Right ird Seat (31) Left (32) Middle (33) Right	(99) Ū	Jnknown		DOMINANT CRUSH DIRECTION (1) Vertical (2) Longitudinal (3) Lateral (7) Catastrophic (9) Unknown

	(All	Measurements Are in Centimet	ers)	
COMPARISON VALUE		DAMAGE VALUE	=	DEFORMATION
	-		=	
	_		=	
	_		=	
	-		=	
			·	

STEERING COLUMN	INSTRUMENT PANEL
	92. Odometer Reading $$ $$ $$ $$,000
87. Steering Column Type (1) Fixed column (2) Tilt column	kilometers
(3) Telescoping column	Code to the nearest 1,000 kilometers (000) No odometer
(4) Tilt and telescoping column	(001) Less than 1,500 kilometers
(8) Other column type (specify):	(500) 499,500 kilometers or more
(9) Unknown	(999) Unknown , miles X 1.6093 =, kilometers
5	
88. Tilt Steering Column Adjustment	source: disital - no power
(0) No tilt steering column	93. Instrument Panel Damage from
(1) Full up (2) Between full up and center	Occupant Contact?
(3) Center	(0) No (1) Yes
(4) Between center and full down	(9) Unknown
(5) Full down	94. Type of Knee Bolster Covering
(9) Unknown	(0) No knee bolster
	(1) Padded
89. Telescoping Steering Column Adjustment (0) No telescoping steering column	(2) Rigid plastic (8) Other (specify):
(1) Full back	(9) Unknown
(2) Between full back and midpoint	95. Knee Bolsters Deformed from
(3) Midpoint (4) Between midpoint and full forward	Occupant Contact?
(5) Full forward	(0) No knee bolster
(9) Unknown	(1) No deformation (2) Yes - deformation
\sim	(9) Unknown
90. Steering Rim/Spoke Deformation	96. Did Glove Compartment Door Open
Code actual measured deformation to the nearest centimeter	During Collision(s)?
(00) No steering rim deformation	(0) No glove compartment door (1) No - door did not open
(01-14) Actual measured value in centimeters (15) 15 centimeters or more	(2) Yes - door opened
(98) Observed deformation cannot be measured	(9) Unknown
(99) Unknown	97. Adaptive (Assistive) Driving Equipment
	(0) No adaptive driving equipment
91. Location of Steering Rim/Spoke	(1) Adaptive driving equipment installed (Check all that apply.)
Deformation (00) No steering rim deformation	[] Hand controls for braking/acceleration
	[] Steering control devices (attached to OEM steering wheel
Quarter Sections (01) Section A	[] Steering knob attached to steering wheel
(02) Section B	[] Low effort power steering (unit or device)
(03) Section C	[] Replacement steering wheel (i.e., reduced diameter)
(04) Section D	[] Joy-stick steering controls
Half Sections	[] Wheelchair tie-downs [] Modification to seat belts (specify):
(05) Upper half of rim/spoke (06) Lower half of rim/spoke	
(07) Left half of rim/spoke	[] Additional or relocated switches (specify):
(08) Right half of rim/spoke	[] Raised roof
(09) Complete steering wheel collapse	[] Wall-mounted head rest (used behind
(10) Undetermined location	wheelchair) [] Other adaptive device (specify):
(99) Unknown	
	(9) Unknown



		POIN	TS OF OCC	UPANT CONTACT		
Contact A B C D E F G H	Interior Component Contacted 202 201 054 252 151 151 012	Occupant No. If Known O O O O O O O O O O O O O O O O O O O	Body Region If Known Head Head Less Less Les Les	Supporting Physical E- Black Scuff Scuffs on har	de roter ranster transfer	Confidence Level of Contact Point
J K L						
of codes ((007) Steering column, tri lever, oth (008) Cellular te radio (009) Add on et tapedeck, (010) Left instrubelow (011) Center ins below (012) Right inst below (013) Glove con (014) Knee bols (015) Windshiel more of theader, A instrumer steering a side only) (016) Windshiel more of theader, A instrumer (passenge (017) Windshiel exterior o	wheel rim wheel hub/spoke wheel (combination 204 and 005) ansmission selector er attachment elephone or CB quipment(e.g., air conditioner) ument panel and strument panel and rument panel and mpartment door ter d including one or hee following: front (A1/A2)-pillar, ht panel, mirror, or ssembly (driver d including one or he following: front (A1/A2)-pillar, ht panel, or mirror er side only)	LEFT SIDE (051) Left sid excludin armrest (052) Left sid armrest (053) Left A. (054) Left B. (055) Other le (056) Left sid (057) Left sid (057) Left sid (058) Left sid includin followir sill, A. (or roof (060) Other le (specify RIGHT SIDE (101) Right S armrest (102) Right S armrest (103) Right A. (104) Right B. (105) Other r (106) Right S (107) Right S (107) Right S (107) Right S (108) Right S (109) Right S includir followir sill, A. (or roof (110) Other r	e interior surface, ng hardware or s e hardware or sit (A1/A2)-pillar billar eft pillar (specify): e window glass e window frame e window sill le window glass go or or more of the gg. frame, window A1/A2)-pillar, B-pillar, side rail. eft side object y): ide interior surface, ng hardware or ts ide hardware or tt (A1/A2)-pillar	AIR BAG (170) Air bag-driver side (175) Air bag compartment cover-driver side (180) Air bag-passenger side (185) Air bag compartment cover-passenger side (190) Other air bag (specify) (195) Other air bag compartment cover (specify) ROOF (201) Front header (202) Rear header (203) Roof left side rail (204) Roof right side rail (205) Roof or convertible top	REAR (301) Backlight (real (302) Backlight stordoor, etc. (303) Other rear obj ADAPTIVE (ASSISTI' EQUIPMENT (401) Hand controls braking/accele (402) Steering contection (attached to Contection wheel) (403) Steering knobectering wheel (405) Replacement (i.e., reduced (406) Joy stick stee (407) Wheelchair ite (408) Modification of (specify): (409) Additional or switches, (specify): (410) Raised roof (411) Wall mounted (used behind (412) Other adaptive (specify): CONFIDENCE LEVEL POINT	age rack, ect (specify): VE) DRIVING for eration ol devices DEM steering attached to elsteering wheel diameter) ring controls e-downs o seat belts, relocated ecify): I head rest wheel chair) e device

MANUAL RESTRAINTS

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for the variable may be found below Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

If a child safety seat is present, encode the data on the back of this page 11.

If the vehicle has automatic restraints available, encode the appropriate data on page 6.

		Left	Center	Right
F I R S T	A-Availability	4.		U
	B-Evidence of usage	04		04
	C-Used in this crash?	60		<u>00</u>
	D-Proper Use	0		0
	E-Failure Modes	0.		0,
	F-Anchorage Adjustment	4		<i>3</i>
	A-Availability	4	3	4
SECO	B-Evidence of usage	00	00	00
	C-Used in this crash?	00	00	00
	D-Proper Use	0	0	0
N D	E-Failure Modes	0	0	0
	F-Anchorage Adjustment			
	A-Availability			
Ţ	B-Evidence of usage			The state of the s
	C-Used in this crash?			
	D-Proper Use			
R	E-Failure Modes	- Andrews - Andr		
	F-Anchorage Adjustment	,		

A-Manual (Active) Belt System Availability

- (0) None available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available type unknown

Integral Belt Partially Destroyed

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify):
- (9) Unknown

B/C-Manual (Active) Belt System Use

- (00) None used, not available, or belt removed/destroyed
- (01) Inoperable (specify):
- ____
- (02) Shoulder belt (03) Lap belt
- (03) Lap belt (04) Lap and shoulder belt
- (05) Belt used type unknown
- (08) Other belt used (specify):
- (12) Shoulder belt used with child safety seat
- (13) Lap belt used with child safety seat
- (14) Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat type unknown
- (18) Other belt used with child safety seat (specify):
- (99) Unknown if belt used

D-Proper Use of Manual (Active) Belts

- (0) None used or not available
- (1) Belt used properly
- (2) Belt used properly with child safety

Belt Used Improperly

- (3) Shoulder belt worn under arm
- (4) Shoulder belt worn behind back or seat
- (5) Belt worn around more than one person
- (6) Lap belt worn on abdomen
- (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):
- (8) Other improper use of manual belt system (specify):
- (9) Unknown

E-Manual (Active) Belt Failure Modes During Accident

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):
- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other manual belt failure (specify):
- (9) Unknown

F-Shoulder Belt Upper Anchorage Adjustment

- (0) No shoulder belt
- (1) No upper anchorage adjustment for shoulder belt

Adjustable shoulder Belt Upper Anchorage

- (2) In full up position
- (3) In mid position
- (4) In full down position
- (5) Position unknown
- (9) Unknown if position has adjustable upper anchorage adjustment

AUTOMATIC RESTRAINTS

NOTES: Encode the data for each applicable front seat position. The attribute for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

Assessment Form: AIR BAGS Frontal Air Bags--Left Front Frontal Air Bags-Right Front OtherAir Bag F Availability/Function Deployment F Failure

Air Bag System Availability/Function

- (0) Not equipped/not available
- (1) Air bag

Non-functional

- (2) Air bag disconnected (specify):
- (3) Air bag not reinstalled
- (9) Unknown

Air Bag System Deployment (This Occupant Position)

- (0) Not equipped/not available
- (1) Deployed during accident (as a result of impact)
- (2) Deployed inadvertently just prior to accident
- (3) Deployed, accident sequence undetermined
- (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
- (5) Unknown if deployed
- (7) Nondeployed
- (9) Unknown

Are There Indications of Air Bag System Failure? (This Occupant Position)

- (0) Not equipped/not available
- (1) No.
- (2) Yes (specify):
- (9) Unknown

AUTOMATIC BELTS

		Left	Right
	A-Availability/Function		
F	B-Use	and the same of th	ومناسبت الله والمسائل المسائل
Ŗ	C-Type	The state of the s	
S T	D-Proper Use	and the second s	
	F-Failure Modes		

A-Automatic (Passive) Belt System Availability/Function

- (0) Not equipped/not available
- (1) 2 point automatic belts
- (2) 3 point automatic belts
- (3) Automatic belts type unknown

Non-functional

- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

B-Automatic (Passive) Belt System Use

- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative)
- (3) Automatic belt use unknown
- (9) Unknown

C-Automatic (Passive) Belt System Type

- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

D-Proper Use of Automatic (Passive) Belt System

- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- (2) Automatic belt used properly with child safety seat

Automatic Belt Used Improperly

- (3) Automatic shoulder belt worn under arm
- (4) Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- (6) Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or

automatic shoulder belt used improperly with child safety seat (specify):

- (8) Other improper use of automatic belt system (specify):
- (9) Unknown

E-Automatic (Passive) Belt Failure Modes During Accident

- (0) Not equipped/not available/not in use
- (1) No automatic belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):
- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other automatic belt failure (specify):
- (9) Unknown

FIRST SEAT FRONTAL AIR BAGS

NOTES: Encode the applicable data *for the driver and first seat passenger* in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

	Driver	Passenger
A-Type of air bag?	I	
B-Flaps open at tear points?		
C-Flaps damaged?		
D-Air bag damaged?	27	
E-Source of air bag damage	97	
F-Air bag tethered?	7	
G-Air bag have vent ports?	7	
H-Other occupant contact air bag?		
I-Occupant wearing eyewear?	7	

A-Type of Air Bag

- (0) Not equipped/not available
- (1) Original manufacturer installed system
- (2) Retrofitted air bag
- (3) Replacement air bag
- (8) Unknown type of air bag
- (9) Unknown

B-Did Air Bag Module Cover Flap(s) Open At Designated Tear Points?

- (0) Not equipped/not available
- (1) No
- (2) Yes
- (3) Deployed, unknown if flap(s) opened at designated tear points
- 7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

C-Were Air Bag Module Cover Flap(s) Damaged?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (3) Deployed, unknown if air bag module cover flap(s) damaged
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

D-Was There Damage To The Air Bag?

- (00) Not equipped/not available
- (01) Not damaged

Yes - Air Bag Damage

- (02) Ruptured
- (03) Cut
- (04) Torn
- (05) Holed
- (06) Burned
- (07) Abraded
- (88) Other damage (specify):
- (95) Damaged, details unknown
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

E-Source of Air Bag Damage

- (00) Not equipped/not available
- (01) Not damaged
- (02) Object worn by occupant, (specify):
- (03) Object carried by occupant, (specify):
- (04) Adaptive/assistive controls, (specify):
- (05) Fire in vehicle
- (06) Thermal burns
- (07) Rescue or emergency efforts
- (88) Other damage source (specify):
- (95) Damaged, unknown source
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

F-Was The Air Bag Tethered?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of tether straps):
- (3) Deployed, unknown if tethered
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

G-Did The Air Bag Have Vent Ports?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of vent ports):
- (3) Deployed, unknown if vent ports present
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

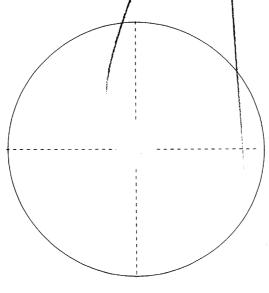
H-Was the Air Bag in this Occupant's Position Contacted by Another Occupant?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

I-Was This Occupant Wearing Eye-wear?

- (0) Not equipped/not available
- (1) No
- (2) Eyeglasses/sunglasses
- (3) Contact lenses
- (4) Deployed, unknown if eyewear worn
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

National Accident Sampling System-Crashworthiness Data System: Interior Vehicle Form DRIVER AIR BAG DAMAGE AND CONTACT SKETCHES 1. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Front) 2. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Back)

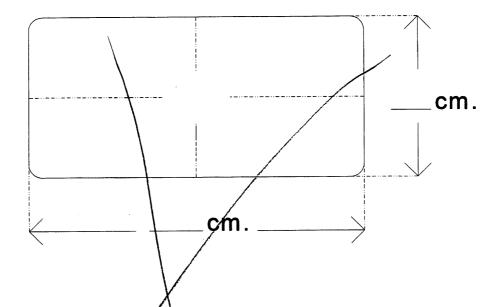


DRIVER AIR BAG S	SKETCHES (Cont'd)
3. DRIVER AIR BAG MODULE COVER FLAP SIZE (SINGLE) width (W _U) width (W _L) height (H)	4. DRIVER AIR BAG MODULE COVER FLAP SIZE (DOUBLE) a. Upper Flap b. Lower Flap width (W _U) width (W _L) height (H _U) height (H _L)
W _U H	W ₀ — T H ₀ H ₁ H ₁ H ₂ H ₃ H ₄ H ₄ H ₄ H ₅ H ₅ H ₄ H ₅
5. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE	6. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS
•	
7. SKETCH LOCATION OF CIRCULAR AIR BAG VENT PORTS 11 12 1 10 2 9 3 8 4 7 6 5	

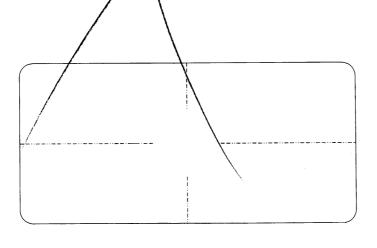
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PASSENGER AIR BAG DAMAGE AND CONTACT SKETCHES

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Front)



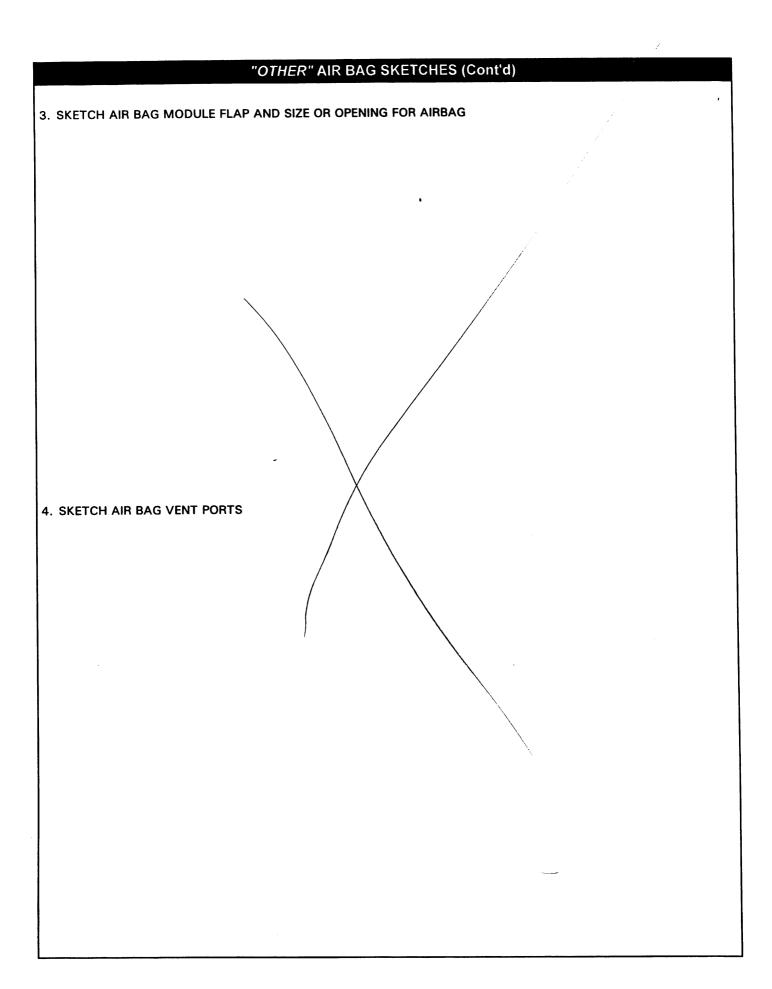
2. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Back)



PASSENGER AIR BAG	G SKETCHES (Cont'd)
3. PASSENGER AIR BAG MODULE COVER FLAP SIZE (SINGLE) width (W) height (H) W 5. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE	4. PASSENGER AIR BAG MODULE COVER FLAP SIZE (DOUBLE) a. Upper Flap width (Wu) height (Hu) Hu Hu Hu Hu Hu Hu Hu Hu Hu
7. SKETCH LOCATION OF RECTANGULAR AIR BAG VENT PORTS 10 11 12 1 2 9 3 8 7 6 5 4	

,

"OTHER" AIR BAG DAMAGE AND CONTACT SKETCHES 1. SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Front) 2. SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Back)



HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for these variables may be found on the next page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
	A-Head Restraint Type/Damage	3		23
	B-Seat Type	82		02
F	C-Seat Orientation	1.		1
R S	D-Seat Track Position	4	\triangle	7
T	E-Seat Back Incline Pre/Post Impact	2/3		23
	F-Seat Performance	<u>_</u>		1
	A-Head Restraint Type/Damage			
	B-Seat Type	03	03	03
S E	C-Seat Orientation)	7	
CO	D-Seat Track Position			
N D	E-Seat Back Incline Pre/Post Impact	01	01	01
	F-Seat Performance	1	1	
	A-Head Restraint Type/Damage			
т	B-Seat Type			
H	C-Seat Orientation			
R	D-Seat Track Position			
D	E-Seat Back Incline Pre/Post Impact			
	F-Seat Performance			
	A-Head Restraint Type/Damage			
o	B-Seat Type			
H	C-Seat Orientation			
E R	D-Seat Track Position			
	E-Seat Back Incline Pre/Post Impact	·		
	F-Seat Performance			

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT CONTACT PATTERN)

HEAD RESTRAINTS/SEAT EVALUATION

A-Head Restraint Type/Damage by E-Seat Back Incline Prior and Post Occupant at This Occupant Position **Impact** (0) No head restraints (00) Occupant not seated or no seat (1) Integral — no damage(2) Integral — damaged during (01) Not adjustable Upright prior to impact accident Moved to completely rearward (11)(3) Adjustable - no damage 15 14 13 position (4) Adjustable — damaged during Moved to rearward midrange 16 12 accident position (5) Add-on - no damage Moved to slightly rearward (6) Add-on - damaged during position accident Retained pre-impact position Other (15)Moved to slightly forward Specify): position (9) Unknown Moved to forward midrange (16)position Moved to completely forward (17)position **B-Seat Type (this Occupant** Position) Slightly reclined prior to impact 24 (00) Occupant not seated or no 25 Moved to completely rearward (21) seat 22 26 position (01) Bucket Moved to rearward midrange (02) Bucket with folding back 21 position (03) Bench Retained pre-impact postion (04) Bench with separate back (24)Moved to upright position cushions (25)Moved to slightly forward Bench with folding back(s) (05) position (06) Split bench with separate back (26)Moved to forward midrange cushions position (07) Split bench with folding (27)Moved to completely forward back(s) position (08) Pedestal (i.e., column supported) Completely reclined prior to impact (09) Box mounted seat (i.e., van (31) Retained pre-impact position 34 33 35 Moved to rearward midrange (32)(10) Other seat type (specify): position 36 32 (33)Moved to slightly rearward (99) Unknown position Moved to upright position Moved to slightly forward (35)position C-Seat Orientation (this Occupant Moved to forward midrange Position) position (0) Occupant not seated or no Moved to completely forward seat position (1)Forward facing seat Rear facing seat (2) Coding diagrams for Seat Back Incline (99) Unknown Side facing seat (inward) Position Prior and Post Impact (3)(4)Side facing seat (outward) (8) Other (specify): F-Seat Performance (this Occupant (9) Unknown Position) (0)Occupant not seated or no seat (1)No seat performance failure(s) (2)Seat adjusters failed **D-Seat Track Adjusted Position Prior** Seat back folding locks or "seat To Impact back" failed (specify): **DESCRIBE ANY INDICATION OF** Occupant not seated or no (0)seat Seat tracks/anchors failed (4) Non-adjustable seat track (1)(5)Deformed by impact of occupant ABNORMAL OCCUPANT POSTURE (6)Deformed by passenger Adjustable Seat Track compartment intrusion Seat at forward most track (2)(specify): position (I.E., UNUSUAL OCCUPANT (7)Combination of above (specify): (3)Seat between forward most and middle track positions (8) Other (specify): Seat at middle track position (4)**CONTACT PATTERN)**

(5)

(6)

(9)

Seat between middle and rear

most track positions

position

Unknown

Seat at rear most track

(9)

Unknown

(11) Rear facing (12) Forward facing (18) Other orientation (specify): (19) Unknown orientation (19) Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Harness/shield/tether used (22) Harness/shield/tether used (23) Unknown if harness/shield/tether used (29) Unknown if child safety seat used (39) Unknown if child safety seat used (59) Unknown if Child safety seat used (59) Unknown if Child safety seat used (50) Unknown if Child safety seat used		HI D SAFET	TY SFAT E	IELD	ASSE	SSMENT		
1. Type of Child Safety Seat 2. Child Safety Seat Orientation 3. Child Safety Seat Harness Usage 4. Child Safety Seat Shield Usage 5. Child Safety Seat Tether Usage 6. Child Safety Seat Make/Model 1. Type of Child Safety Seat (0) No child safety Seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used (2) Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (03) Unknown orientation Designed for Forward Facing for This Age/Weight (11) Rear facing (12) Forward tacing (13) Unknown orientation Unknown Design or Orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (18) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (18) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Harness/shield/rether used (33) Child Safety seat used (34) Child Safety seat weld (35) Child Safety seat weld (36) Unknown if harness/Shield/Tether (37) Child Safety seat weld (38) Unknown if harness/Shield/Tether used (39) Unknown if harness/Shield/Tether used (39) Unknown if harness/Shield/Tether used (39) Unknown if harness/Shield/Tether used (39) Unknown if harness/Shield/Tether used (39) Unknown if harness/Shield/Tether used (39) Unknown if harness/Shield/Tether used (39) Unknown if harness/Shield/Tether used (30) Unknown if harness/Shield/Tether used (31) Unknown if harness/Shield/Tether used (32) Unknown if harness/Shield/Tether used (33) Child Safety seat used (34) Child Safety seat used (35) Child Safety seat used (36) Child Safety seat used (37) Child Safety seat used (38) Child Safety seat used (39) Unknown if harness/Shield/Tether used (39) Unknown if harness/Shield/Tether used (39) Unknown if harness/Shield/Tet	When a child safety seat is Dre	sent enter the	occupant's nu	umber	in the fi	rst row and co	omplete the co	olumn below at present.
1. Type of Child Safety Seat 2. Child Safety Seat Orientation 3. Child Safety Seat Harness Usage 4. Child Safety Seat Shield Usage 5. Child Safety Seat Tether Usage 6. Child Safety Seat Make/Model 1. Type of Child Safety Seat (i) No child safety Seat (ii) Infant seat (iii) Infant seat (iii) Infant seat (iii) Convertible seat (iiii) Convertible seat (iiii) Convertible seat (iiii) Convertible seat (iiii) Unknown child safety seat (specify): (iiii) Unknown if child safety seat used (iv) No child safety seat (specify): (iiii) Convertible seat (iv) No child safety seat (specify): (iv) Unknown child safety seat (specify): (iv) Unknown if child safety seat used (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat used (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) No child safety seat (iv) Olions Below Are Used for Variables 3-5. (iv) No child safety seat (iv) Olions Below Are Used for Variables 3-5. (iv) No child safety seat (iv) No child safety seat (iv) Olions Below Are Used for Variables 3-5. (iv) No child safety seat (iv) Olions Below Are Used for Variables 3-5. (iv) No child safety seat (iv) Arter market harness/shield/tether (iv) After market harness/shield/tether (iv	Occupant Number							
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(22) Forward facing (28) Other orientation (specify): (29) Unknown orientation (99) Unknown if child safety seat used	(0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety (8) Unknown child safety (9) Unknown if child safety (9) Unknown if child safety (9) Unknown if child safety (00) No child safety seat Designed for Rear Facing This Age/Weight (01) Rear facing (02) Forward facing (08) Other orientation (s (09) Unknown orientation Designed for Forward Facage/Weight (11) Rear facing (12) Forward facing (12) Forward facing (13) Other orientation (s (19) Unknown orientation Unknown Design or Orientation Age/Weight, or Unknown (21) Rear facing (22) Forward facing (23) Other orientation (s (29) Unknown orientation	ty seat (specific viseat type ety seat used ety seat used etion ety): n cing for This pecify): n ntation For Thi n Age/Weight pecify):	S	4. (6. f. f. f. f. f. f. f. f. f. f. f. f. f.	Child Sanote: Op OO) Not Desi OO) Africado (O2) Africado (O2) Africado (O3) Chinado (O3) Chinado (O3) Unicado (O3) Unicado	fety Seat Shidety Seat Tetotions Below child safety signed with Hater market haded, not used ter market had safety seamess/shield/tknown if harman of Designed the safety Seat Markety Seat	eld Usage her Usage Are Used for viseat arness/Shield/ress/shield/te tress/shield/te trused, but no ether added ness/shield/te ss/Shield/Teth tether not use tether used ness/shield/te d With Harnes tether used ness/shield/te d With Harnes tether used ness/shield/te ld safety seat ake/Model	Tether ether used of after market ther wither ther der der der der der der der der der d

National Accident Sampling System-Crashworthiness Data System: Interior Vehicle Form **EJECTION/ENTRAPMENT DATA** Complete the following if the researcher has any indication that an occupant was either ejected from or entrapped in the vehicle. Code the appropriate data on the Occupant Assessment Form. No [] Yes [] **EJECTION** Describe indications of ejection and body parts involved in partial ejection(s): **Occupant Number Ejection** (Note on Vehicle Interior Sketch) **Ejection Area Ejection Medium** Medium Status **Ejection** (7) Roof (5) Integral structure (1) Complete ejection (8) Other area (e.g., back of (8) Other medium (specify): (2) Partial ejection pickup, etc.) (specify): (3) Ejection, Unknown degree (9) Unknown (9) Unknown (9) Unknown **Medium Status (Immediately Prior Ejection Medium Ejection Area** to Impact) (1) Windshield (1) Door/hatch/tailgate (1) Open (2) Left front (2) Nonfixed roof structure (2) Closed (3) Right front (3) Fixed glazing (3) Integral structure (4) Left rear (4) Nonfixed glazing (specify): (9) Unknown (5) Right rear (6) Rear Yes [] **ENTRAPMENT** No [Describe entrapment mechanism:

Component(s):____ (Note on vehicle interior sketch)

OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

	174	OCCUPANT'S SEATING
1. Primary Sampling Unit Number	<u> </u>	
2. Case Number - Stratum	<u> 15</u>	10. Occupant's Seat Position Front Seat
3. Vehicle Number	01	(11) Left side
	OT	(12) Middle (13) Right side
4. Occupant Number	<u> </u>	(14) Other (specify):
OCCUPANT'S CHARACTERISTIC	CS	(15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by m (97) 97 years and older (99) Unknown	<u>a</u> <u>l</u>	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant Third Seat (31) Left side
6. Occupant's Sex	<u></u>	(32) Middle
(1) Male		(33) Right side
(2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd	d month)	(34) Other (specify):(35) On or in the lap of another occupant
 (3) Female-pregnant-1st trimester(1st-3rd) (4) Female-pregnant-2nd trimester(4th-6th) (5) Female-pregnant-3rd trimester(7th-9th) (6) Female-pregnant-term unknown (9) Unknown 	th month)	Fourth Seat (41) Left side (42) Middle (43) Right side (44) Other (specify): (45) On or in the lap of another occupant
7. Occupant's Height	\mathcal{Q}	
Code actual height to the nearest		(97) In or on unenclosed area
centimeter.		(98) Other seat (specify):(99) Unknown
(999) Unknown		(99) Olikilowii
65 inches $\times 2.54 = 165$ centimeters		>
8. Occupant's Weight Code actual weight to the nearest	50	11. Occupant's Posture (0) Normal posture
kilogram. (999) Unknown		Abnormal posture
		(1) Kneeling or standing on seat (2) Lying on or across seat
9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	s	(2) Lying off or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

12. Ejection (i) No ejection (ii) Complete ejection (ii) Complete ejection (ii) Ejection, unknown degree (iv) Unknown 13. Ejection Area (iv) No ejection (iv) Windshield (iv) Left tront (iv) Windshield (iv) Left treat (iv) Rear (iv) Rear (iv) Rear (iv) Rear (iv) Unknown 16. Entrapped/exit not inhibited (iv) Left treat (iv) Rear (iv) Rear (iv) Rear (iv) Rear (iv) Rear (iv) Unknown 17. Nocotion (iv) Unknown 18. Ejection Medium (iv) Windshield (iv) Left rear (iv) Rear (iv) Rear (iv) Rear (iv) Unknown 19. Unknown 10. No ejection (iv) Wordshield left to eight electronic distribution of the properties of the propertie	EJECTION/ENTRAPMENT							
(1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify):	12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown		15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown 16. Entrapment (0) Not entrapped/exit not inhibited					
14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (2) Removed from vehicle due to perceived serious injuries (3) Exited vehicle under own power (4) Exited vehicle under own power (5) Occupant fully ejected (8) Removed from vehicle for other reasons (specify): (9) Unknown	 (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify):		(1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify): (9) Unknown 17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or					
	(0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify):	<u>O</u>	 (2) Removed from vehicle due to perceived serious injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (8) Removed from vehicle for other reasons (specify): 					

18. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify): (9) Unknown 19. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (05) Belt used—type unknown (06) Belt used—type unknown (07) Cetherbet word (farseith) (08) Cetherbet word (farseith) (09) Unknown (100) Romanual Shoulder Belt Upper Anchorage (101) No upper anchorage adjustment (not position (BELT SYSTEM FUNCTION							
(5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify): (9) Unknown 19. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (04) Lap and shoulder belt (05) Belt used—type unknown (2) In full up position (3) In mid position (4) In full down position (5) Position unknown (9) Unknown (9) Unknown if position has adjustable upper anchorage adjustment 23. Automatic (Passive) Belt System Availability/Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24. Automatic (Passive) Belt System Use	Adjustment (0) No manual shoulder belt (1) No upper anchorage adjustment for manual shoulder belt	(0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt						
19. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown	(2) In full up position (3) In mid position (4) In full down position (5) Position unknown stroyed/removed) (9) Unknown if position has adjustable upper	 (5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) 						
19. Manual (Active) Belt System Use (OO) None used, not available, or belt removed/destroyed (O1) Inoperative (specify): (O2) Shoulder belt (O3) Lap belt (O4) Lap and shoulder belt (O5) Belt used—type unknown Function (O) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24 Automatic (Passive) Relt System Use	23. Automatic (Passive) Belt System Availability/	(9) Unknown						
(02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (05) Shoulder belt (14) Automatic belts destroyed or rendered inoperative (9) Unknown (14) Automatic belts destroyed or rendered (9) Unknown	Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown	(00) None used, not available, or belt removed/destroyed						
	(4) Automatic belts destroyed or rendered inoperative (9) Unknown	(03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown						
(12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (10) Not equipped/not available/destroyed or rendered inoperative (11) Automatic belt in use (22) Automatic belt not in use (manually disconnected, motorized track inoperative) (33) Automatic belt use unknown (48) Other belt used with child safety seat (99) Unknown	(0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown	(13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unk						
(specify): (99) Unknown if belt used 20. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly 25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown	Belts (25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system	(specify):(99) Unknown if belt used 20. Proper Use of Manual (Active) Belts (0) None used or not available						
(2) Belt used properly with child safety seat Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify): (26. Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly (3) Automatic belt used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen	Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn	 (2) Belt used properly with child safety seat Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system 						
(9) Unknown (7) Automatic lap and shoulder belt or		(9) Unknown						
21. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown	with child safety seat (specify): ot available (8) Other improper use of automatic belt system (specify):	During Accident (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not						
(3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other manual belt failure (specify): (2) Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify):	During Accident (O) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated	 (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): 						
(9) Unknown (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify): (9) Unknown	(7) Combination of above (specify): (8) Other automatic belt failure (specify):	(9) Unknown						

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Vehicle inspection [] Official injury data Driver/occupant interview [] Other (specify): [] Unknown if belt used	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION						
35. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (_000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (_996) Deployment, unknown longitudinal Delta V (_997) Not deployed (_998) Unknown if deployed (_999) Unknown					
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown					
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged					
38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(7) Not deployed (8) Unknown if deployed (9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn					
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown					

	FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued		HEAD RESTRAINT AND SEAT EVALUATION
	EVALUATION continued	_	49. Head Restraint Type/Damage by Occupant
44.	Source of Air Bag Damage		at This Occupant Position
	(00) Not equipped/not available	•	(O) No head restraints
	(O1) Not damaged		(1) Integral—no damage
	(02) Object worn by occupant, (specify):		(2) Integral—damaged during accident
	(03) Object carried by occupant, (specify):	-	(3) Adjustable—no damage (4) Adjustable—damaged during accident
	(03) Object carried by occupant, (specify).		(5) Add-on—no damage
	(04) Adaptive/assistive controls, (specify):		(6) Add-on—damaged during accident
		_	(8) Other (specify):
l	(05) Fire in vehicle		
	(06) Thermal burns		(9) Unknown
	(07) Rescue or emergency efforts (88) Other damage source (specify):		50. Seat Type (this Occupant Position)
	(88) Other damage source (speed y).		(00) Occupant not seated or no seat
	(95) Damaged, unknown source	_	(O1) Bucket
:	(96) Deployed, unknown if damaged		(O2) Bucket with folding back
	(97) Not deployed		(O3) Bench
	(98) Unknown if deployed (99) Unknown		(04) Bench with separate back cushions
	(99) Unknown	7	(05) Bench with folding back(s) (06) Split bench with separate back cushions
l			(07) Split bench with folding back(s)
45.	Was The Air Bag Tethered?		(08) Pedestal (i.e., column supported)
	(0) Not equipped/not available (1) No		(09) Box mounted seat (i.e., van type)
	(2) Yes (specify number of tether straps):		(10) Other seat type (specify):
ŀ			(99) Unknown
İ	(3) Deployed, unknown if tethered		(99) Unknown
	(7) Not deployed		51. Seat Orientation (this Occupant Position)
1	(8) Unknown if deployed (9) Unknown	7	(0) Occupant not seated or no seat
			(1) Forward facing seat
46.	Did The Air Bag Have Vent Ports?		(2) Rear facing seat
	(0) Not equipped/not available (1) No		(3) Side facing seat (inward) (4) Side facing seat (outward)
	(2) Yes (specify number of vent ports):		(8) Other (specify):
	(3) Deployed, unknown if vent ports present		(9) Unknown
	(7) Not deployed		50 Cost Track Adjusted Position Prior To Impact
	(8) Unknown if deployed (9) Unknown		52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat
1	(9) Olikilowii	_/	(1) Non-adjustable seat track
47.	Was the Air Bag in this Occupant's Position		(1, 110.1 25,211
!	Contacted by Another Occupant?		Adjustable Seat Track
	(0) Not equipped/not available		(2) Seat at forward most track position
	(1) No (2) Yes (specify):		(3) Seat between forward most and middle track
	(2) Tes (specify).		positions (4) Seat at middle track position
	(3) Deployed, unknown if other occupant cont	act	(5) Seat between middle and rear most track
ł	to air bag		positions
	(7) Not deployed		(6) Seat at rear most track position
	(8) Unknown if deployed		(9) Unknown
	(9) Unknown	~	
48	. Was This Occupant Wearing Eye-wear?	/	
'	(0) Not air bag equipped/air bag not available		•
	(1) No		
	(2) Eyeglasses/sunglasses		
	(3) Contact lenses (4) Deployed, unknown if eyewear worn		
1	(7) Not deployed		
1	(8) Unknown if deployed		
	(9) Unknown		

HEAD R	ESTRAINT	AND SEAT	EVALUATION	continued
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- 53. Seat Back Incline Prior and Post Impact
- $\partial 3$
- (00) Occupant not seated or no seat
- (01) Not adjustable

Upright prior to impact

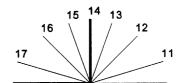
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

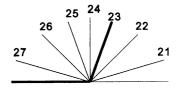
Slightly reclined prior to impact

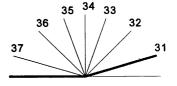
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
 - (0) Occupant not seated or no seat
 - (1) No seat performance failure(s)
 - (2) Seat adjusters failed
 - (3) Seat back folding locks or "seat back" failed (specify):
 - (4) Seat track/anchors failed
 - (5) Deformed by impact of occupant
 - (6) Deformed by passenger compartment intrusion, (specify):
 - (7) Combination of above (specify):
 - (8) Other (specify):
 - (9) Unknown







	Cl	HILD SAFET	Y SEA	AT	
55.	Child Safety Seat Make/Model (000) No child safety seat	<u> </u>	3. Child	Safety Seat Harness Usage	$\frac{\partial \mathcal{O}}{\partial \mathbf{v}}$
	Applicable codes are found in your NASS Data Collection, Coding and Editing (950) Built-in child safety seat	CDS 59). Child	Safety Seat Shield Usage	<u>00</u>
	(997) Other make/model (specify): (998) Unknown make/model	60). Child	Safety Seat Tether Usage	$\bigcirc\bigcirc$
	(999) Unknown if child safety seat used		Varia	: Options below applicable to bles OA58-OA60. No child safety seat	
	Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat - with shield (5) Booster seat - without shield (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/We (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age (11) Rear facing (12) Forward facing (13) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (29) Unknown orientation		Not 1 (01) (02) (03) (09) Design (11) (12) (19) Unkr (21) (22) (29)	Designed With Harness/Shield/Ter After market harness/shield/teth added, not used After market harness/shield/teth Child safety seat used, but no a harness/shield/tether added Unknown if harness/shield/tether added or used aned With Harness/Shield/Tether Harness/shield/tether not used Unknown if harness/shield/tether Harness/shield/tether used Unknown if harness/shield/tether town If Designed With Harness/S Harness/shield/tether not used Harness/shield/tether used Unknown if harness/shield/tether Unknown if child safety seat us	ner used ofter market er er used Shield/Tether er used
	(99) Unknown if child safety seat used				•

National Accident Sampling System-Crashworthines	s Data System: Occupant Assessment Form Pa	age
INJURY CONSEQUENCES		
61. Injury Severity (Police Rating) (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify):	
62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):	64. Hospital Stay (00) Not Hospitalized Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown	C
Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify): (8) Transported to a medical facility-unknown i treated (9) Unknown	65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost	
EMERGENCY RI	ESPONSE INFORMATION	
EMS Notification (1) Not notified ROAD V (2) Notified (9) Unknown AIR VE	EMS Type (O1) Fire department (O2) Rescue squad EHICLE (O3) Police department (O4) Trauma unit (O5) Disaster unit (O5) AIR VEHICLE FIRST TRANSPOR UNIT FRANSPOR UNIT FRANSPOR UNIT FRANSPOR UNIT FRANSPOR UNIT FRANSPOR UNIT ARRAPHICLE AIR VEHICLE	ITING
EMS NotificationTime (first unit) (9999) Unknown FOAD VEHICLE AIR VEHICLE	(06) Ambulance service unit (07) Hospital (08) Mortuaries/funeral homes (98) Other, specifiy:	
EMS Arrival Time (first unit) (9998) EMS cancelled or did not arrive (9999) Unknown EMS Arrival Time (first unit) ROAD VEHICLE		NG PORT

(9999) Unknown AIR VEHICLE STOP WORK HERE VARIABLES 66-74 TO BE CODED BY THE ZONE CENTER

ROAD VEHICLE

AIR VEHICLE

ROAD VEHICLE

EMS Departure Time To.

transport

not used

Unknown

EMS Arrival Time At

Treatment Facility

(9997)

(9998)

(9999)

Treatment Facility (transporting unit)

EMS arrived, provided

treatment, but did not

EMS arrived, but was

(04)

(05)

(06)

(07)

(08)

(98)

(99)

CPR

Emergency cardiac care

Emergency burn care

Other, specify: ____

Unknown

pulse rate, respiration, EKG)

Combination of above, specify: _

AIR VEHICLE

Life support system monitoring (blood pressure,

TO BE CODED BY THE ZONE CENTER

	INJURY CONSEQUENCES	TRAUMA DATA
	Time to Death Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
68.	1st Medically Reported Cause of Death 2nd Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify):	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given 73. Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
70.	(97) Other result (includes fatal ruled disease) (specify): (99) Unknown Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used



U.S. Department of Transportation National Highway Traffic Safety Administration

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

2. Case Number - Stratum

3. Vehicle Number

4. Occupant Number

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

			A.I.S 9	10				Injury		Occupant
0	Source of Injury Body Data Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area Intrusion Number
	wo				e ja Sastika					
1st	5. 7 6. <u>2</u>	7. <u>9</u>	8. <u>()</u> <u>(</u>	9.02	10	-11. <u>/</u>	12. <u>() () 2</u>	<u>√13. 3</u>	14	15. <u>O</u> O
240	of Injury Body Region 5. 7 6. 2 DWW 16. 7 17. 2	18.9_	19.04	20. <u>O</u> <u>2</u>	21/	22. <u>/</u>	23. <u>00</u> <u>2</u>	<u>-24.3</u>	25. <u>/</u>	26. <u>()</u>
3rd	27 28	29	30	31	32	33	34	_ 35	36	37
4th	38 39	40	41	42	43	44	45	_ 46	47	48
5th	49 50	51	52	53	54	55	56	_ 57	58	59
							Ų		141. state 141. state 15. state a state	
6th	6061.	62	63	64	65	66	67	_ 68	69,	70
7th	71 72	73	74	75	76	77	78,	79	80	81
r										
8th	82 83	84	85	86	87	88	89	_ 90	91	92
9th	93 94	95	96	97	98	99 1	00	_101,	102	103
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
10th	104 105	106	107	108	109	110 1	11	_112	113	114
	· · · · · · · · · · · · · · · · · · ·									

HS Form 433B (1/96)

This report is authorized by P.L. 89-563, Title 1, Section 106, 108, and 112. While you are not required to respond, your cooperation is needed to make the results of this data collection effort comprehensive, accurate, and timely.

	7			occ	UPANT	INJURY	DATA				1
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th	_							· ·			
12th		_				_					
13th		_	_	 _			 -	. — —			
14th	——	_	_							 -	
15th	·	_									
16th											
17th		· · · · · · · · · · · · · · · · · · ·								# * 	
18th											
19th											
20th							_				
21st											
22nd			. 	-							
23rd							<u></u>		<u>-</u>		
24th											
25th							The second secon	or thou authorize			

OCCUPANT INJURY CLASSIFICATION Aspect Body Region Specific Anatomic Level of Injury Structure Specific injuries are (1)Right Head assigned consecutive (2)**Face** (2)Left (3)two-digit numbers Bilateral Vessels, Nerves, Organs. (3) Neck beginning with 02. (4)Central Bones, Joints are assigned (4) Thorax Abdomen consecutive two digit (5)Anterior (5) numbers beginning with To the extent possible, (6)Posterior (6)Spine within the organizational (7)Superior **Upper Extremity** 02. (7)framework of the AIS, 00 (8)Inferior **Lower Extremity** (8)(9)Unspecified The exceptions to this rule is assigned to an injury Unknown (9) NFS as to severity or (0) Whole region apply to: where only one injury is given in the dictionary for Type of Anatomic Whole Area (02) Skin - Abrasion that anatomic structure. Structure (04) Skin - Contusion 99 is assigned to any injury NFS as to lesion or Whole Area (06) Skin - Laceration (1) (08) Skin - Avulsion severity. (2) Vessels (10) Amputation Nerves (3) **Abbreviated Injury Scale** Organs (includes (20) Burn (4)Muscles/ligaments) (30) Crush (40) Degloving Minor Injury Skeletal (includes (5)Moderate Injury (50)Injury - NFS (2)ioints) (3) Serious Injury Trauma, other than Head - LOC (90)(6)mechanical (4) Severe Injury (9) Skin Critical Injury (5)(6) Maximum Head - LOC (02) Length of LOC (untreatable) (7)Injured, unknown severity (O4) Level (06) of (08) Consciousness

(10) Concussion

Thoracic (06) Lumbar

(02) Cervical

<u>Spine</u>

(04)

SOURCE OF INJURY DATA	INJURY SOURCE	DIRECT/INDIRECT INJURY
	CONFIDENCE LEVEL	
OFFICIAL RECORDS (1) Autopsy records with or without hospital/medical records (2) Hospital/medical records other than emergency room (e.g., discharge summary) (3) Emergency room records only (including associated X-rays or other lab reports) (4) Private physician, walk-in or emergency clinic	(1) Certain (2) Probable (3) Possible (9) Unknown	 (1) Direct contact injury (2) Indirect contact injury (3) Noncontact injury (7) Injured, unknown source
UNOFFICIAL RECORDS (5) Lay coroner report (6) E.M.S. personnel (7) Interviewee (8) Other source (specify):		

	,		INJURY	SOUF	RCES		,
FRON	т	(102)	Right side hardware or	(183)	Air bag-passenger side and	(411)	Wall mounted head rest
(001)	Windshield		armrest		object held		(used behind wheel chair)
(002)	Mirror	(103)	Right A (A1/A2)-pillar	(184)	Air bag-passenger side and	(412)	Other adaptive device
(003)	Sunvisor	(104)	Right B-pillar		object in mouth		(specify):
(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185)	Air bag compartment		
(005)	Steering wheel hub/spoke				cover-passenger side		
(006)	Steering wheel (combination	(106)	Right side window glass	(186)	Air bag compartment	EXTER	RIOR of OCCUPANT'S
	of codes 004 and 005)	(107)	Right side window frame		cover-passenger side and	VEHIC	
(007)	Steering column,	(108)	Right side window sill		eyewear	(451)	Hood
	transmission selector lever,	(109)	Right side window glass	(187)	Air bag compartment	(452)	Outside hardware (e.g.,
	other attachment		including one or more of the		cover-passenger side and		outside mirror, antenna)
(800)	Cellular telephone or CB		following: frame, window		jewelry	(453)	Other exterior surface or
	radio		sill, A (A1/A2)-pillar, B-pillar,	(188)	Air bag compartment		tires (specify):
(009)	Add on equipment (e.g.,		or roof side rail.		cover-passenger side and		
	tape deck, air conditioner)	(110)	Other right side object		object held		
(010)	Left instrument panel and below		(specify):	(189)	Air bag compartment cover-passenger side and	(454)	Unknown exterior objects
(011)	Center instrument panel and				object in mouth	EXTER	RIOR OF OTHER MOTOR
	below	INTER	IOR	(190)	Other air bag (specify)	VEHIC	
(012)	Right instrument panel and	(151)	Seat, back support				Front bumper
	below	(152)	Belt restraint webbing/buckle	(195)	Other air bag compartment		Hood edge
(013)	Glove compartment door		Belt restraint B-pillar or door		cover (specify)		Other front of vehicle
(014)	Knee bolster		frame attachment point				(specify):
(015)	Windshield including one or	(154)	Other restraint system				
	more of the following: front		component (specify):	ROOF		(504)	Hood
	header, A (A1/A2)-pillar,			(201)	Front header	(505)	Hood ornament
	instrument panel, mirror, or	(155)	Head restraint system	(202)	Rear header		Windshield, roof rail, A-pillar
	steering assembly (driver		Other occupants (specify):	(203)	Roof left side rail		Side surface
	side only)				Roof right side rail	(508)	
(016)	Windshield including one or	(161)	Interior loose objects		Roof or convertible top		Other side protrusions
	more of the following: front	(162)	Child safety seat (specify):				(specify):
	header, A (A1/A2)-pillar,			FLOOF	1		(0,000)
	instrument panel, or mirror	(163)	Other interior object	(251)	Floor (including toe pan)	(510)	Rear surface
	(passenger side only)		(specify):		Floor or console mounted		Undercarriage
(017)	Windshield reinforced by				transmission lever, including		Tires and wheels
	exterior object (specify)				console		Other exterior of other motor
		AIR BA	AG .	(253)	Parking brake handle		vehicle (specify):
(019)	Other front object (specify):	(170)	Air bag-driver side		Foot controls including		
		(171)	Air bag-driver side and		parking brake	(514)	Unknown exterior of other
			eyewear			,,	motor vehicle
LEFT S	SIDE	(172)	Air bag-driver side and	REAR			
(051)	Left side interior surface,		jewelry	(301)	Backlight (rear window)	OTHER	R VEHICLE OR OBJECT IN
	excluding hardware or	(173)	Air bag-driver side and object		Backlight storage rack,		NVIRONMENT
	armrests		held		door, etc.		Ground
(052)	Left side hardware or	(174)	Air bag-driver side and object	(303)	Other rear object (specify):		Other vehicle or object
	armrest		in mouth			,	(specify):
(053)	Left A (A1/A2)-pillar	(175)	Air bag compartment				(-p
	Left B-pillar		cover-driver side	ADAP	TIVE (ASSISTIVE) DRIVING	(599)	Unknown vehicle or object
	Other left pillar (specify):	(176)	Air bag compartment	EQUIP		,555/	CONTRACTOR OF ODJECT
			cover-driver side and		Hand controls for	NONC	ONTACT INJURY
(056)	Left side window glass		eyewear	,	braking/acceleration		Fire in vehicle
	Left side window frame	(177)	Air bag compartment	(402)	Steering control devices		Flying glass
	Left side window sill		cover-driver side and jewelry	,	(attached to OEM steering		Other noncontact injury
	Left side window glass	(178)	Air bag compartment		wheel)	,003)	source
	including one or more of the	. ,	cover-driver side and object	(403)	Steering knob attached to		
	following: frame, window		held	(400)	steering wheel	(EOA)	(specify):
	sill, A (A1/A2)-pillar, B-pillar,	(179)	Air bag compartment	(405)	Replacement steering wheel		Air bag exhaust gases
	or roof side rail.		cover-driver side and object	,400/	(i.e., reduced diameter)	(03/)	Injured, unknown source
(060)	Other left side object		in mouth	(406)			
	(specify):	(180)	Air bag-passenger side		Joy stick steering controls Wheelchair tie-downs		
			Air bag-passenger side and		Modification to seat belts,		
		,	eyewear	1400)	(specify):		
RIGHT	SIDE	(182)	Air bag-passenger side and	(409)	Additional or relocated		
	Right side interior surface,	,,	jewelry	(703)			
	excluding hardware or		, · · · ·		switches, (specify):		
	÷						
	armrests			(410)	Raised roof		

OFFICIAL INJURY DATA - SOFT TISSUE INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

Restrained?

___ No

Yes

Blood Alcohol Level (mg/dl)

BAL =

Glasgow Coma Scale Score

GCSS = ____

Units of Blood Given

Units = ____

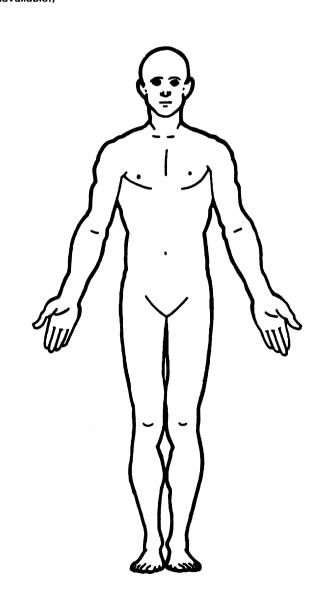
Arterial Blood Gases

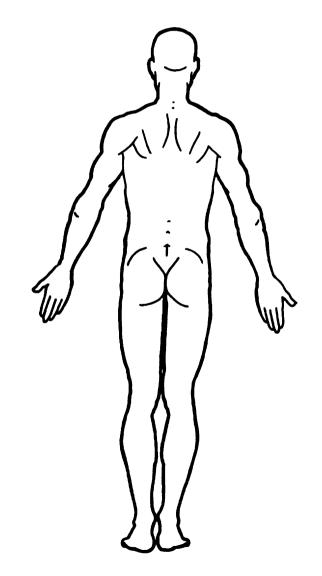
pH = __.__

PO₂ = ____

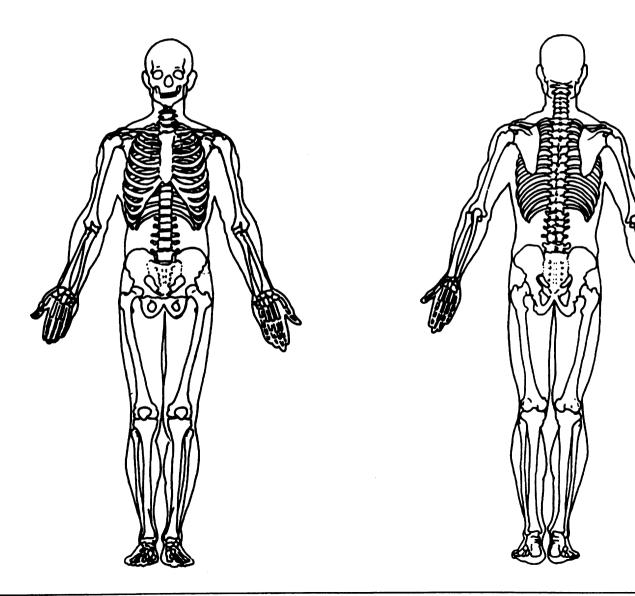
PCO₂

HCO₃ ____

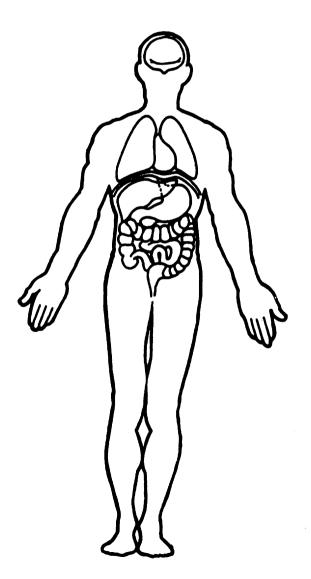


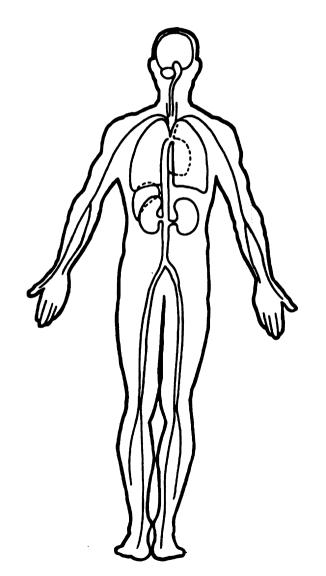


Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1 Primary Campling Unit Number	OCCUPANT'S SEATING
1. Primary Sampling Unit Number	10 O
2. Case Number - Stratum	10. Occupant's Seat Position Front Seat
	(11) Left side
3. Vehicle Number	
4 Convent Number	
	(14) Other (specify):
OCCUPANT'S CHARACTERISTICS	(15) On or in the lap of another occupant
3. Vehicle Number 4. Occupant Number OCCUPANT'S CHARACTERISTICS 5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown 6. Occupant's Sex (1) Male (2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown (9) Unknown 7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknown Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown 1 7 pounds X .4536 53 kilograms 9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	(12) Middle (13) Right side

EJEC	TION/E	NTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown		15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown 14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown		16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify): (9) Unknown 17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or not oriented to time or place (2) Removed from vehicle due to perceived serious injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (8) Removed from vehicle for other reasons (specify): (9) Unknown

BELT SYSTE	M FUNCTION
18. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify):	22. Manual Shoulder Belt Upper Anchorage Adjustment (0) No manual shoulder belt (1) No upper anchorage adjustment for manual shoulder belt Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position (4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment
(9) Unknown 19. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used — type unknown (08) Other belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat (16) Belt used with child safety seat (17) Belt used with child safety seat (18) Other belt used with child safety seat (19) Unknown if belt used 20. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify): (9) Unknown 21. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used or not available (1) No manual belt silure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify):	23. Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown 25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (3) Motorized system (9) Unknown 26. Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly (3) Automatic belt used properly (3) Automatic belt used properly (4) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown 27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included)
 (7) Combination of above (specify): (8) Other manual belt failure (specify): (9) Unknown 	(3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify): (9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown 31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event
(3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown 32. Other Than First Seat Frontal Air Bag
Check the Primary Source Used In Determining Belt Use. [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify): [] Unknown if belt used	Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35. Had Vehicle Been in Previous Accident(s)? (O) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (_000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (_996) Deployment, unknown longitudinal Delta V (_997) Not deployed (_998) Unknown if deployed (_999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown 38. Air Bag Deployment Accident Event	(9) Unknown 42. Were Air Bag Module Cover Flap(s) Damaged? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed
Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

HEAD RESTRAINT AND SEAT EVALUATION FIRST SEAT FRONTAL AIR BAG SYSTEM **EVALUATION** continued 49. Head Restraint Type/Damage by Occupant 44. Source of Air Bag Damage at This Occupant Position (00) Not equipped/not available (0) No head restraints (01) Not damaged Integral-no damage (1) (02) Object worn by occupant, (specify): (2) Integral-damaged during accident (3) Adjustable - no damage (03) Object carried by occupant, (specify): (4) Adjustable-damaged during accident (5) Add-on-no damage (04) Adaptive/assistive controls, (specify): (6) Add-on-damaged during accident (8) Other (specify): (05) Fire in vehicle (06) Thermal burns (9) Unknown (07) Rescue or emergency efforts (88) Other damage source (specify): 50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (95) Damaged, unknown source (01) Bucket (96) Deployed, unknown if damaged (02) Bucket with folding back (97) Not deployed (03) Bench (98) Unknown if deployed (04) Bench with separate back cushions (99) Unknown (05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) 45. Was The Air Bag Tethered? (08) Pedestal (i.e., column supported) (0) Not equipped/not available (09) Box mounted seat (i.e., van type) (1) No (10) Other seat type (specify): (2) Yes (specify number of tether straps): (99) Unknown (3) Deployed, unknown if tethered (7) Not deployed 51. Seat Orientation (this Occupant Position) (8) Unknown if deployed (0) Occupant not seated or no seat (9) Unknown (1) Forward facing seat 46. Did The Air Bag Have Vent Ports? (2) Rear facing seat (0) Not equipped/not available (3) Side facing seat (inward) (1) No (4) Side facing seat (outward) (2) Yes (specify number of vent ports): (8) Other (specify): (3) Deployed, unknown if vent ports present (9) Unknown (7) Not deployed (8) Unknown if deployed 52. Seat Track Adjusted Position Prior To Impact (9) Unknown (0) Occupant not seated or no seat (1) Non-adjustable seat track 47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? Adjustable Seat Track (O) Not equipped/not available (2) Seat at forward most track position (1) No (3) Seat between forward most and middle track (2) Yes (specify): positions (4) Seat at middle track position (3) Deployed, unknown if other occupant contact (5) Seat between middle and rear most track to air bag positions (7) Not deployed (6) Seat at rear most track position (8) Unknown if deployed (9) Unknown (9) Unknown 48. Was This Occupant Wearing Eye-wear? (0) Not air bag equipped/air bag not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses (4) Deployed, unknown if eyewear worn (7) Not deployed (8) Unknown if deployed (9) Unknown

HEAD RESTRAINT AND SEAT EVALUATION continued

53. Seat Back Incline Prior and Post Impact



- (00) Occupant not seated or no seat
- (01) Not adjustable

Upright prior to impact

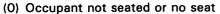
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

Slightly reclined prior to impact

- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

Completely reclined prior to impact

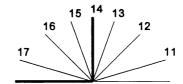
- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)

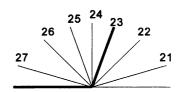


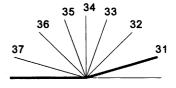
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed (specify):
- (4) Seat track/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion, (specify):

(7) Combination of above (spe	cifv	specify	speci	above (of	ination	Combi	(7)
-------------------------------	------	---------	-------	---------	----	---------	-------	-----

- (8) Other (specify):
- (9) Unknown







	CHILD SAFETY SEAT					
55.	Child Safety Seat Make/Model	58. 	Child Safety Seat Harness Usage			
	(000) No child safety seat Applicable codes are found in your NASS CDS					
	Data Collection, Coding and Editing	59	. Child Safety Seat Shield Usage			
	(950) Built-in child safety seat	33.	Crima duricty ocat ornicia osage			
	(997) Other make/model (specify):		$\wedge \wedge$			
		60.	. Child Safety Seat Tether Usage $\qquad \qquad \ \ \ \ \ \ \ \ \ \ \ \ $			
	(998) Unknown make/model					
	(999) Unknown if child safety seat used		Note: Options below applicable to			
			Variables OA58-OA60.			
-	Time of Child Sofety Soot	İ	(00) No child safety seat			
50.	Type of Child Safety Seat (0) No child safety seat		Not Designed With Harness/Shield/Tether			
	(1) Infant seat		(01) After market harness/shield/tether			
	(2) Toddler seat		added, not used			
	(3) Convertible seat	İ	(02) After market harness/shield/tether used			
1	(4) Booster seat - with shield		(03) Child safety seat used, but no after market			
1	(5) Booster seat - without shield		harness/shield/tether added			
	(7) Other type child safety seat (specify):		(09) Unknown if harness/shield/tether added or used			
	(8) Unknown child safety seat type		added or used			
	(9) Unknown if child safety seat type		Designed With Harness/Shield/Tether			
	(5) Olikilowii ii oliila saloty soat asoa		(11) Harness/shield/tether not used			
			(12) Harness/shield/tether used			
57.	Child Safety Seat Orientation		(19) Unknown if harness/shield/tether used			
	(00) No child safety seat					
		ŀ	Unknown If Designed With Harness/Shield/Tether			
	Designed for Rear Facing for This Age/Weight		(21) Harness/shield/tether not used (22) Harness/shield/tether used			
1	(01) Rear facing (02) Forward facing	l	(29) Unknown if harness/shield/tether used			
İ	(08) Other orientation (specify):		(20, 0, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			
	, , , , , , , , , , , , , , , , , , ,	l	(99) Unknown if child safety seat used			
1	(09) Unknown orientation	ľ				
l						
	Designed For Forward Facing for This Age/Weight (11) Rear facing	1				
	(11) hear facing (12) Forward facing					
	(18) Other orientation (specify):					
İ	, , , , , , , , , , , , , , , , , , ,	ļ				
	(19) Unknown orientation	Ì				
	II I a com Decima of Origination 5 To The					
Ī	Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight					
	(21) Rear facing					
	(22) Forward facing					
	(28) Other orientation (specify):	1				
	(29) Unknown orientation					
	(99) Unknown if child safety seat used					
	(55) Olikilowii ii Cililu Salety Seat useu					
		1				
		1				

National Accident Sampling System-Crashworthiness Da	ta System: Occupant Assessment Form Page
INJURY CONSEQUENCES	
61. Injury Severity (Police Rating)	63. Type Of Medical Facility (for Initial Treatment)
(0) O - No injury	(0) Not treated at a medical facility
(1) C - Possible injury	(1) Trauma center
(2) B - Nonincapacitating injury	(2) Hospital
(3) A - Incapacitating injury	(3) Medical clinic
(4) K - Killed	(4) Physician's office
	(5) Treatment later at medical facility
(5) U - Injury, severity unknown	(8) Other (specify):
(6) Died prior to accident	
(9) Unknown	(9) Unknown
62. Treatment - Mortality	
(0) No treatment	64. Hospital Stay
(1) Fatal	(00) Not Hospitalized
(1) Fatal (2) Fatal - ruled disease (specify):	Code the number of days (up through 60)
(2) Fatal - fuled disease (specify).	that the occupant stayed in hospital.
	(61) 61 days or more
Monfetal	(99) Unknown
Nonfatal	\mathcal{I}
(3) Hospitalization	65. Working Days Lost
(4) Transported and released	Code the number of days
(5) Treatment at scene - nontransported	(up through 60) that the occupant
(6) Treatment later	lost from work due to the accident
(7) Treatment - other (specify):	(00) No working days lost
(O) Toward to a modical facility value with	(61) 61 days or more
(8) Transported to a medical facility-unknown if	(62) Fatally injured
treated	(97) Not working prior to accident
(9) Unknown	(99) Unknown
EMERGENCY RESP	ONSE INFORMATION
EMS Notification	EMS Type FIRST TRANSPORTING UNIT TRANSPORTING
(1) Not notified ROAD VEHICLE (2) Notified	(02) Rescue squad
(9) Unknown	(03) Police department ROAD VEHICLE
(o) Olimiowii	(04) Trauma unit
	(05) Disaster unit
EMS NotificationTime (first unit)	(06) Ambulance service unit
(9999) Unknown	(07) Hospital
TANK TIAN	(08) Mortuaries/funeral homes
AIR VEHICLE	(98) Other, specifiy:
FAC Aminal Time (final smith)	(99) Unknown
EMS Arrival Time (first unit) (9998) EMS cancelled or did	
not arrive	EMS Care
(9999) Unknown	(O1) No care administered ON-SCENE TRANSPORT
(0000) Olimiotti	(O2) First aid

First aid ROAD VEHICLE (03) Resuscitation (04)EMS Departure Time To ROAD VEHICLE AIR VEHICLE (05) Treatment Facility (transporting unit) Emergency cardiac care EMS arrived, provided (06)Life support system monitoring (blood pressure, (9997)AIR VEHICLE pulse rate, respiration, EKG) treatment, but did not (07)transport Emergency burn care (9998)EMS arrived, but was (80) Combination of above, specify: (98)Other, specify: _ not used (9999)Unknown (99)Unknown **EMS Arrival Time At** ROAD VEHICLE Treatment Facility (9999)Unknown AIR VEHICLE STOP WORK HERE VARIABLES 66-74 TO BE CODED BY THE ZONE CENTER

TO BE CODED BY THE ZONE CENTER

INJURY CONSEQUENCES	TRAUMA DATA
Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death 68. 2nd Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify): (97) Other result (includes fatal ruled	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given 73. Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported , HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
disease) (specify): (99) Unknown 70. Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used



U.S. Department of Transportation National Highway Traffic Safety Administration

OCCUPANT INJURY FORM

Form Approved 0.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

- 1. Primary Sampling Unit Number _______ 3. Vehicle Number
- 2. Case Number Stratum 201E

4. Occupant Number

01

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

				A.I.S 9	90				Injury		Occupan
	Source of Injury Pata		Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	 Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area Intrusion Number
uk (Mark										
1st	5	6	7. <u>9</u>	8. <u>00</u>	9.02	10/	-11. <u>-2</u>	42. <u>602</u>	13. <u>3</u>	14. <u>3</u>	15. <u>O</u> O
2nd	16.	1 7.	18	19	20	21	22.	23.	24.	25.	26.
3rd	27	28	29	30	31	32	33	34:	35	36	37
											* .
4th	38 ;	39	40	41	42	43	44	45	46	47	48
5th	49	50	51.	52	53	54	55. <u> </u>	56	57	58	59
6th	60	31.	62	63	64	65	66	67	68	69,	70
7th	71.	72	73	74	75,	76	77	78	79	80	81
					,						
8th	82	33	84	85	86	87	88	89	90	91	92
9th	93	94	95	96	97.	98	99	100	101,	102	103
10th 1	104 10	05	106 1	l 07	108	109	110	111	112	113	114

	,			occ	UPANT	INJURY	DATA				•
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th			_			<u></u>					
12th			_								
13th	_	_	_							_	
14th											
15th	· ·				+ 1						
16th							_				
17th											
18th											
19th											
20th							<u></u>				
21st											
22nd							<u></u>		<u>-</u>		
23rd							<u></u> -				
24th											
25th											

DIRECT/INDIRECT INJURY

OCCUPANT INJURY CLASSIFICATION **Specific Anatomic** Level of Injury Aspect **Body Region** Structure Specific injuries are (1) Head (1)Right assigned consecutive Left (2)Face (2)Neck Vessels, Nerves, Organs. two-digit numbers (3)Bilateral (3)beginning with 02. (4)Central Thorax Bones, Joints are assigned (4)(5) Anterior (5)consecutive two digit Abdomen numbers beginning with Posterior To the extent possible, (6)(6)Spine Upper Extremity within the organizational (7)Superior (7)(8) framework of the AIS, 00 **Lower Extremity** Inferior (8) The exceptions to this rule is assigned to an injury (9) Unknown Unspecified (9)apply to: NFS as to severity or (0) Whole region where only one injury is given in the dictionary for Type of Anatomic Whole Area (02) Skin - Abrasion Structure that anatomic structure. 99 is assigned to any (04) Skin - Contusion (06) Skin - Laceration injury NFS as to lesion or Whole Area (08) Skin - Avulsion severity. (2) **Vessels** (10) Amputation (3) **Nerves Abbreviated Injury Scale** Organs (includes (20) Burn (4)(30) Crush Muscles/ligaments) (40) Degloving Minor Injury (5) Skeletal (includes Injury - NFS (2) Moderate Injury (50)joints) Serious Injury Head - LOC (90)Trauma, other than (3) (6) Severe Injury (4)(9) Skin mechanical Critical Injury (5) Head - LOC (6)Maximum (untreatable) (02) Length of LOC (7) Injured, unknown (04) Level severity (06) of (08) Consciousness

(10) Concussion

(02) Cervical (04) Thoracic (06) Lumbar

Spine

SOURCE OF INJURY DATA

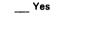
SOUNCE OF INSURT DATA	MOONT GOONGE	Diffe of All Diffe of All Collins
	CONFIDENCE LEVEL	
OFFICIAL RECORDS (1) Autopsy records with or without hospital/medical records (2) Hospital/medical records other than emergency room (e.g., discharge summary) (3) Emergency room records only (including associated X-rays or other lab reports) (4) Private physician, walk-in or emergency clinic	(1) Certain (2) Probable (3) Possible (9) Unknown	(1) Direct contact injury (2) Indirect contact injury (3) Noncontact injury (7) Injured, unknown source
UNOFFICIAL RECORDS (5) Lay coroner report (6) E.M.S. personnel (7) Interviewee (8) Other source (specify):		

INJURY SOURCE

	,		INJURY	sour	RCES		`
FRON	т	(102)	Right side hardware or	(183)	Air bag-passenger side and	(411)	Wall mounted head rest
(001)	Windshield		armrest		object held		(used behind wheel chair)
(002)	Mirror	(103)	Right A (A1/A2)-pillar	(184)	Air bag-passenger side and	(412)	Other adaptive device
(003)	Sunvisor	(104)	Right B-pillar		object in mouth		(specify):
(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185)	Air bag compartment		
(005)	Steering wheel hub/spoke				cover-passenger side		
(006)	Steering wheel (combination	(106)	Right side window glass	(186)	Air bag compartment	EXTE	RIOR of OCCUPANT'S
	of codes 004 and 005)	(107)	Right side window frame		cover-passenger side and	VEHIC	CLE
(007)	Steering column,	(108)	Right side window sill		eyewear	(451)	Hood
l	transmission selector lever,	(109)	Right side window glass	(187)	Air bag compartment	(452)	Outside hardware (e.g.,
l	other attachment		including one or more of the		cover-passenger side and		outside mirror, antenna)
(008)	Cellular telephone or CB		following: frame, window		jewelry	(453)	Other exterior surface or
	radio		sill, A (A1/A2)-pillar, B-pillar,	(188)	Air bag compartment		tires (specify):
(009)	Add on equipment (e.g.,		or roof side rail.		cover-passenger side and		
	tape deck, air conditioner)	(110)	Other right side object		object held		
(010)	Left instrument panel and below		(specify):	(189)	Air bag compartment cover-passenger side and	(454)	Unknown exterior objects
(011)	Center instrument panel and				object in mouth	EXTE	RIOR OF OTHER MOTOR
	below	INTER	IOR	(190)	Other air bag (specify)	VEHIC	
(012)	Right instrument panel and	(151)	Seat, back support				Front bumper
	below	(152)	Belt restraint webbing/buckle	(195)	Other air bag compartment		Hood edge
(013)	Glove compartment door		Belt restraint B-pillar or door		cover (specify)		Other front of vehicle
(014)	Knee bolster		frame attachment point				(specify):
(015)	Windshield including one or	(154)	Other restraint system				10,000.177.
	more of the following: front		component (specify):	ROOF		(504)	Hood
	header, A (A1/A2)-pillar,			(201)	Front header		Hood ornament
	instrument panel, mirror, or	(155)	Head restraint system	(202)	Rear header		Windshield, roof rail, A-pillar
	steering assembly (driver	(160)	Other occupants (specify):	(203)	Roof left side rail		Side surface
	side only)			(204)	Roof right side rail	(508)	Side mirrors
(016)	Windshield including one or	(161)	Interior loose objects	(205)	Roof or convertible top	(509)	Other side protrusions
	more of the following: front	(162)	Child safety seat (specify):				(specify):
	header, A (A1/A2)-pillar,			FLOO			
	instrument panel, or mirror	(163)	Other interior object		Floor (including toe pan)	(510)	Rear surface
	(passenger side only)		(specify):	(252)	Floor or console mounted	(511)	Undercarriage
(017)	Windshield reinforced by				transmission lever, including	(512)	Tires and wheels
	exterior object (specify)		_		console	(513)	Other exterior of other motor
(010)	Other force ships for saif A	AIR BA			Parking brake handle		vehicle (specify):
(019)	Other front object (specify):		Air bag-driver side	(254)	Foot controls including		
		(1717	Air bag-driver side and eyewear		parking brake	(514)	Unknown exterior of other
LEFT S	SIDE	(172)	Air bag-driver side and	REAR			motor vehicle
	Left side interior surface,	(., _,	jewelry		Backlight (sans window)	OTHE	D VEHICLE OF OR JEST IN
,,,,	excluding hardware or	(173)	Air bag-driver side and object		Backlight (rear window) Backlight storage rack,		R VEHICLE OR OBJECT IN
	armrests	(held	(302)	a		NVIRONMENT
(052)	Left side hardware or	(174)	Air bag-driver side and object	(303)	oor, etc. Other rear object (specify):		Ground
, ,	armrest	,,,,	in mouth	(505)	Other rear object (specify).	(336)	Other vehicle or object (specify):
(053)	Left A (A1/A2)-pillar	(175)	Air bag compartment				(opooli y).
	Left B-pillar		cover-driver side	ADAP	TIVE (ASSISTIVE) DRIVING	(599)	Unknown vehicle or object
(055)	Other left pillar (specify):	(176)	Air bag compartment	EQUIP		(000,	Charleton vehicle of object
			cover-driver side and		Hand controls for	NONC	ONTACT INJURY
(056)	Left side window glass		eyewear	,	braking/acceleration		Fire in vehicle
(057)	Left side window frame	(177)	Air bag compartment	(402)	Steering control devices		Flying glass
(058)	Left side window sill		cover-driver side and jewelry	*	(attached to OEM steering		Other noncontact injury
(059)	Left side window glass	(178)	Air bag compartment		wheel)	,	source
	including one or more of the		cover-driver side and object	(403)	Steering knob attached to		(specify):
	following: frame, window		held		steering wheel	(604)	Air bag exhaust gases
	sill, A (A1/A2)-pillar, B-pillar,	(179)	Air bag compartment	(405)	Replacement steering wheel		Injured, unknown source
	or roof side rail.		cover-driver side and object		(i.e., reduced diameter)		
(060)	Other left side object		in mouth	(406)	Joy stick steering controls		
	(specify):		Air bag-passenger side		Wheelchair tie-downs		
		(181)	Air bag-passenger side and	(408)	Modification to seat belts,		
B:0::=	CIDE		eyewear		(specify):		
RIGHT			Air bag-passenger side and	(409)	Additional or relocated		
	Right side interior surface,			(409)			
			Air bag-passenger side and		Additional or relocated		

OFFICIAL INJURY DATA - SOFT TISSUE INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



Restrained? _ No

Blood Alcohol Level (mg/dl)

BAL = ____

Glasgow Coma Scale Score

GCSS =

Units of Blood Given

Units =

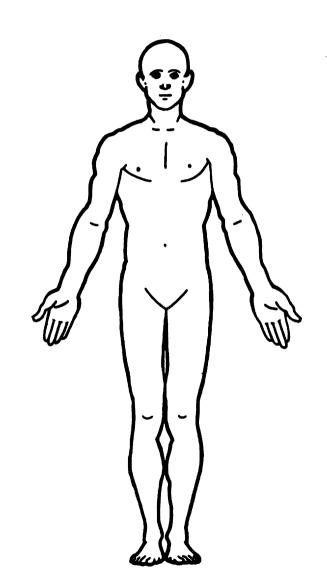
Arterial Blood Gases

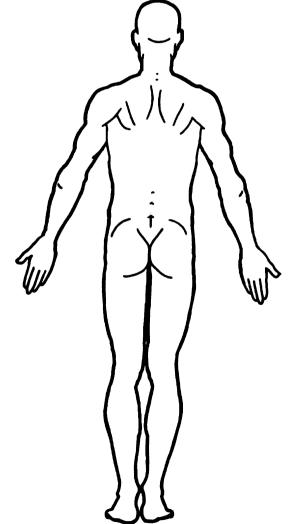
pH = __.__

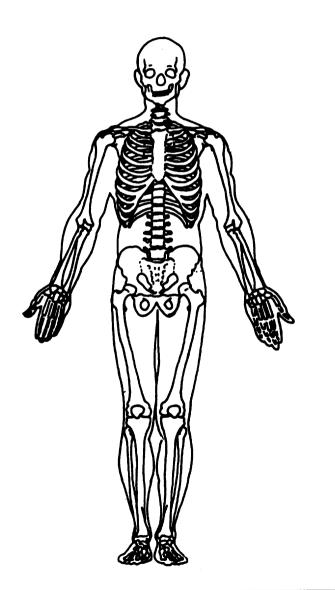
PO₂ = ____

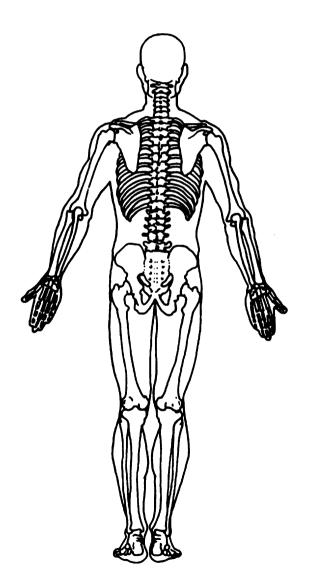
PCO₂

HCO₃ ____

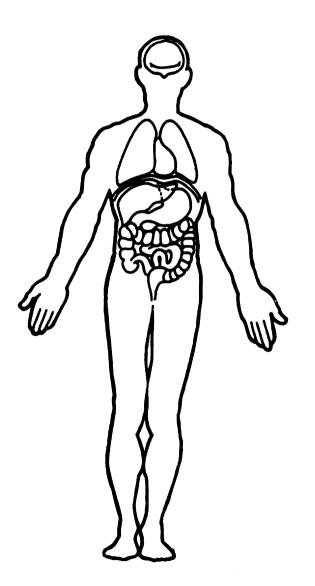


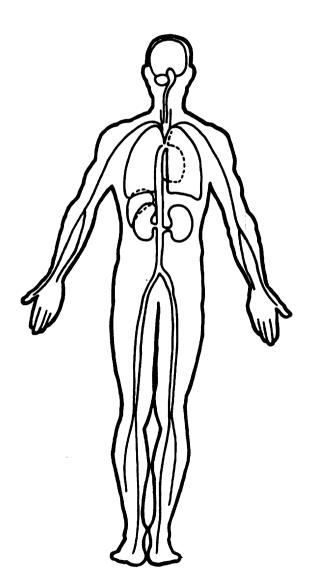






OFFICIAL INJURY DATA - INTERNAL INJURIES





OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM

National Highway Traffic Safety Administration CRASHWORTHINESS DATA SYSTEM **OCCUPANT'S SEATING** 1. Primary Sampling Unit Number 10. Occupant's Seat Position 2. Case Number - Stratum Front Seat (11) Left side 3. Vehicle Number (12) Middle (13) Right side 4. Occupant Number (14) Other (specify): **OCCUPANT'S CHARACTERISTICS** (15) On or in the lap of another occupant Second Seat 5. Occupant's Age (21) Left side Code actual age at time of accident. (22) Middle (00) Less than one year old (specify by month): (23) Right side (97) 97 years and older (24) Other (specify): (25) On or in the lap of another occupant (99) Unknown Third Seat (31) Left side (32) Middle 6. Occupant's Sex (33) Right side (1) Male (34) Other (specify): (2) Female-not reported pregnant (35) On or in the lap of another occupant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) Fourth Seat (41) Left side (6) Female-pregnant-term unknown (42) Middle (9) Unknown (43) Right side (44) Other (specify): (45) On or in the lap of another occupant 7. Occupant's Height (97) In or on unenclosed area Code actual height to the nearest (98) Other seat (specify): centimeter. (99) Unknown (999) Unknown inches X 2.54 = 160 centimeters 11. Occupant's Posture 8. Occupant's Weight (0) Normal posture Code actual weight to the nearest kilogram. Abnormal posture (999) Unknown (1) Kneeling or standing on seat (2) Lying on or across seat pounds X .4536 = OS kilograms (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear 9. Occupant's Role window (1) Driver (5) Sitting on a console (2) Passenger (6) Lying back in a reclined seat position (9) Unknown (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

EJECTION/ENTRAPMENT						
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown 13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear	CTION/EN	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown 16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify):				
(5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown 14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown		(9) Unknown 17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or not oriented to time or place (2) Removed from vehicle due to perceived serious injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (8) Removed from vehicle for other reasons (specify): (9) Unknown				

18. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (dap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify): (9) Unknown 19. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used with child safety seat (13) Lap belt used with child safety seat (13) Lap belt used with child safety seat (13) Lap belt used with child safety seat (13) Belt used with child safety seat (15) Belt used with child safety seat (15) Belt used with child safety seat (15) Belt used more capable (specify): (99) Unknown if belt used (10) None used or not available (20) Proper Use of Manual (Active) Belts (21) In full down position (3) In mid position (4) In full down position (5) Position unknown (9) Unknown (9) Unknown (9) Unknown (10) Not equipped/not available (11) 2 point automatic belts (12) 2 apoint automatic belts (13) Automatic belts destroyed or rendered inoperative (14) Lap and shoulder belt (15) Belt used with child safety seat (15) Belt used with child safety seat (15) Belt used with child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (15) Belt used of the child safety seat (16) None of the child safety seat (17) None of the child safety seat (18) Automatic belt of the child safety seat (19) Unknown (20) Not equipped/not availa	
(9) Unknown (1) Belt used properly (2) Belt used properly with child safety seat **Belt Used Improperly** (3) Shoulder belt worn under arm (4) Shoulder belt worn abdomen (5) Belt worn around more than one person (6) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify): (9) Unknown 21. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (9) Unknown 26. Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/(1) Automatic belt used properly with child safety seat (specify): (2) Automatic belt used Improperly (3) Automatic belt worn under arm (4) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt seat (specify): (9) Unknown 27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken retractor	er ve) ve) mack y ystem
(1) No automatic belt failure(s)	ncluded)

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Vehicle inspection [] Official injury data Driver/occupant interview [] Other (specify): [] Unknown if belt used	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (_000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (_996) Deployment, unknown longitudinal Delta V (_997) Not deployed (_998) Unknown if deployed (_999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown 38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(9) Unknown 42. Were Air Bag Module Cover Flap(s) Damaged (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed (9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued	HEAD RESTRAINT AND SEAT EVALUATION
44. Source of Air Bag Damage	49. Head Restraint Type/Damage by Occupant at This Occupant Position
(00) Not equipped/not available	(0) No head restraints
(O1) Not damaged	(1) Integral—no damage
(02) Object worn by occupant, (specify):	(2) Integral—damaged during accident
(02) Object Wolli by Goodpalle, top and,	(3) Adjustable—no damage
(03) Object carried by occupant, (specify):	(4) Adjustable—damaged during accident
(00) 00,000 00,000 0, 100,000	(5) Add-on—no damage
(04) Adaptive/assistive controls, (specify):	(6) Add-on—damaged during accident
	(8) Other (specify):
(05) Fire in vehicle	(6)
(06) Thermal burns	(9) Unknown
(07) Rescue or emergency efforts	\sim 2
(88) Other damage source (specify):	50. Seat Type (this Occupant Position)
	(00) Occupant not seated or no seat
(95) Damaged, unknown source	(01) Bucket
(96) Deployed, unknown if damaged	(02) Bucket with folding back
(97) Not deployed	(03) Bench
(98) Unknown if deployed	(04) Bench with separate back cushions
(99) Unknown	(05) Bench with folding back(s)
	(06) Split bench with separate back cushions
45. Was The Air Bag Tethered?	(07) Split bench with folding back(s)
(0) Not equipped/not available	(08) Pedestal (i.e., column supported)
(1) No	(09) Box mounted seat (i.e., van type) (10) Other seat type (specify):
(2) Yes (specify number of tether straps):	(10) Other seat type (specify):
	(99) Unknown
(3) Deployed, unknown if tethered	(93) Olikilowii
(7) Not deployed	51. Seat Orientation (this Occupant Position)
(8) Unknown if deployed	(0) Occupant not seated or no seat
(9) Unknown	(1) Forward facing seat
46. Did The Air Bag Have Vent Ports?	(2) Rear facing seat
(0) Not equipped/not available	(3) Side facing seat (inward)
(1) No	(4) Side facing seat (outward)
(2) Yes (specify number of vent ports):	(8) Other (specify):
(3) Deployed, unknown if vent ports present	(9) Unknown
(7) Not deployed	(6, 6,
(8) Unknown if deployed	52. Seat Track Adjusted Position Prior To Impact
(9) Unknown	(0) Occupant not seated or no seat
	(1) Non-adjustable seat track
47. Was the Air Bag in this Occupant's Position	
Contacted by Another Occupant?	Adjustable Seat Track
(O) Not equipped/not available	(2) Seat at forward most track position
(1) No	(3) Seat between forward most and middle track
(2) Yes (specify):	positions
(3) Deployed, unknown if other occupant contact	(4) Seat at middle track position (5) Seat between middle and rear most track
to air bag (7) Not deployed	positions (6) Seet at year most track position
(8) Unknown if deployed	(6) Seat at rear most track position (9) Unknown
(9) Unknown	(9) Olikilowii
(o) onknown	
48. Was This Occupant Wearing Eye-wear?	
(0) Not air bag equipped/air bag not available	
(1) No	
(2) Eyeglasses/sunglasses	
(3) Contact lenses	
(4) Deployed, unknown if eyewear worn	
(7) Not deployed	
(8) Unknown if deployed	
(9) Unknown	

HEAD RESTRAINT AND SEAT EVALUATION continued
--

53. Seat Back Incline Prior and Post Impact



- (00) Occupant not seated or no seat
- (01) Not adjustable

Upright prior to impact

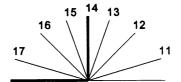
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

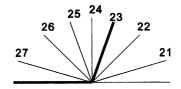
Slightly reclined prior to impact

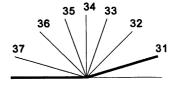
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
 - (0) Occupant not seated or no seat
 - (1) No seat performance failure(s)
 - (2) Seat adjusters failed
 - (3) Seat back folding locks or "seat back" failed (specify):
 - (4) Seat track/anchors failed
 - (5) Deformed by impact of occupant
 - (6) Deformed by passenger compartment intrusion, (specify):
 - (7) Combination of above (specify):
 - (8) Other (specify):
 - (9) Unknown







	CHILD SAF	FETY SEAT
55.	Child Safety Seat Make/Model (000) No child safety seat	58. Child Safety Seat Harness Usage
	Applicable codes are found in your NASS CDS Data Collection, Coding and Editing (950) Built-in child safety seat	59. Child Safety Seat Shield Usage
	(997) Other make/model (specify):	60. Child Safety Seat Tether Usage
	(998) Unknown make/model (999) Unknown if child safety seat used	Note: Options below applicable to Variables OA58-OA60. (00) No child safety seat
	Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat - with shield (5) Booster seat - without shield (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (12) Forward facing (13) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (29) Unknown orientation	Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used

National Accident Sampling System-Crashworthiness Da	a System. Occupant Assessment Form	raye
INJURY CONSEQUENCES		
61. Injury Severity (Police Rating) (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown 62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify): Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify): (8) Transported to a medical facility-unknown if treated (9) Unknown	63. Type Of Medical Facility (for Initial Trea (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify): (9) Unknown 64. Hospital Stay (00) Not Hospitalized Code the number of days (up throathat the occupant stayed in hospital. (61) 61 days or more (99) Unknown 65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown	_ <u>උ</u>
EMS Notification	ONSE INFORMATION EMS Type (01) Fire department	TRANSPORTING
ROAD VEHICLE	(O1) Fire department UNIT	UNIT

EMS Not	rification	,	EMS	Туре	FIRST TRANSPOR
(1) N	ot notified	ROAD VEHICLE	(01)	Fire department	FIRST TRANSPOR
	otified		(02)	Rescue squad	
,	nknown	AIR VEHICLE	(03)	Police department	ROAD VEHICLE
,			(04)	Trauma unit	
			(05)	Disaster unit	AIR VEHICLE
EMS Not	ificationTime (first unit)		(06)	Ambulance service unit	
(9999)	Unknown	ROAD VEHICLE	(07)	Hospital	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(08)	Mortuaries/funeral homes	
	_	AIR VEHICLE	(98)	Other, specifiy:	
			(99)	Unknown	
EMS Arr	ival Time (first unit)				
(9998)	EMS cancelled or did	ROAD VEHICLE			
(0000,	not arrive		EMS	Care	DURIN
(9999)	Unknown	AIR VEHICLE	(01)	No care administered	ON-SCENE TRANSP
,,,,,,	·····		(02)	First aid	
			(03)	Resuscitation	ROAD VEHICLE
FMS Der	parture Time To		(04)	CPR	
	nt Facility (transporting unit)	ROAD VEHICLE	(05)	Emergency cardiac care	AIR VEHICLE
(9997)	EMS arrived, provided		(06)	Life support system monit	orina (blood pressui
,,,,,	treatment, but did not	AIR VEHICLE		pulse rate, respiration, EK	•
	transport		(07)	Emergency burn care	-,
(9998)	EMS arrived, but was		(08)	Combination of above, spe	ecify:
(0000)	not used		(98)	Other, specify:	
(9999)	Unknown		(99)	Unknown	·
EMS Arri	val Time At	ROAD VEHICLE	(33)	CHARLOWII	
(9999)	Unknown				

TO BE CODED BY THE ZONE CENTER

	INJURY CONSEQUENCES	TRAUMA DATA
66.	Time to Death Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
	1st Medically Reported Cause of Death 2nd Medically Reported Cause of Death	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units):
	Zila Modisally Hoperica Calaba C. Zasa	(9) Unknown if blood given
69.	3rd Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify):	73. Arterial Blood Gases (ABG) – HCO ₃ / (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
	(97) Other result (includes fatal ruled disease) (specify):	BELT USE DETERMINATION
	(99) Unknown	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed
70.	Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used



U.S. Department of Transportation National Highway Traffic Safety Administration

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 04 3. Vehicle Number 0/

2. Case Number - Stratum 20/E 4. Occupant Number 03

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

				A.I.S 9	90				Injury		Occupa
	Data	y Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area
Clast	لامن الله <u>ح</u> .5	6. <u>4</u>	7. <u>9</u> _	8. <u>04</u>	s. <u>02</u>	10. <u>/</u>	11. <u>/</u>	12. <u>/ 60</u>	13. <u>3</u>	14/	15. <u>OV</u>
2nd	16	17	18	19	20	21.	22	23	24	25	26
3rd	27	28	29	30.	31,	32,	33	34	35	36	37
4th	38	39	40	41	42	43	44	45	46.	47	48
5th	49	50	51.	52	53	54	55	56	57	58	59
6th	60	61.	62	63	64	65	66	67	68	69	70
7th	71	72	73	74	75	76	77	78,	79	80	81,
8th	82	83.	84	85	86	87	88	89	90	91	92.
9th	93	94	95	96	97	98	99	100,	101,	102	103
10th 1	04	105	106	107	108	109	110	111	112	113	114.

HS Form 433B (1/96)

This report is authorized by P.L. 89-563, Title 1, Section 106, 108, and 112. While you are not required to respond, your cooperation is needed to make the results of this data collection effort comprehensive, accurate, and timely.

(06) Lumbar

SOURCE OF INJURY DATA

DIRECT/INDIRECT INJURY

OCCUPANT INJURY CLASSIFICATION Level of Injury **Specific Anatomic Aspect Body Region** Structure (1) Head Specific injuries are (1) Right assigned consecutive (2)Face (2)Left (3) Vessels, Nerves, Organs. two-digit numbers (3) Neck Bilateral Bones, Joints are assigned beginning with 02. (4)Thorax (4) Central (5)Abdomen consecutive two digit (5) Anterior numbers beginning with To the extent possible, (6)Posterior (6)Spine **Upper Extremity** within the organizational 02. (7)Superior (7)framework of the AIS, 00 Lower Extremity (8) Inferior (8) The exceptions to this rule is assigned to an injury (9) (9)Unspecified Unknown NFS as to severity or apply to: (0)Whole region where only one injury is given in the dictionary for Type of Anatomic Whole Area (02) Skin - Abrasion that anatomic structure. Structure (04) Skin - Contusion 99 is assigned to any injury NFS as to lesion or (06) Skin - Laceration Whole Area (08) Skin - Avulsion severity. (2) Vessels (3) (10) Amputation Nerves Organs (includes **Abbreviated Injury Scale** (4)(20) Burn (30) Crush Muscles/ligaments) (40) Degloving Minor Injury (5) Skeletal (includes Moderate Injury joints) (50) Injury - NFS (2)Head - LOC (90) Trauma, other than (3)Serious Injury (6)mechanical (4)Severe Injury (9) Skin Critical Injury (5) Head - LOC (6)Maximum (02) Length of LOC (untreatable) (7)Injured, unknown (O4) Level severity (06) of (08) Consciousness (10) Concussion **Spine** (02) Cervical (04) Thoracic

CONFIDENCE LEVEL OFFICIAL RECORDS (1) Certain (1) Direct contact injury (1) Autopsy records with or (2) Indirect contact injury without hospital/medical (2) Probable (3) Noncontact injury (3) Possible records (2) Hospital/medical records other (9) Unknown Injured, unknown source than emergency room (e.g., discharge summary) (3) Emergency room records only (including associated X-rays or other lab reports) (4) Private physician, walk-in or emergency clinic **UNOFFICIAL RECORDS** (5) Lay coroner report (6) E.M.S. personnel (7) Interviewee (8) Other source (specify): (9) Police

INJURY SOURCE

	·		INJURY	SOUI	RCES		`
FRON	ıT	(102)	Right side hardware or	(183)	Air bag-passenger side and	(411)	Wall mounted head rest
(001)	Windshield	•	armrest		object held	1-711)	(used behind wheel chair)
(002)	Mirror	(103)	Right A (A1/A2)-pillar	(184)	Air bag-passenger side and	(412)	
(003)	Sunvisor		Right B-pillar	(,	object in mouth	(412)	Other adaptive device
(004)	Steering wheel rim		Other right pillar (specify):	(185)	Air bag compartment		(specify):
	Steering wheel hub/spoke		The right place (opening).	(100,	cover-passenger side		
	Steering wheel (combination	(106)	Right side window glass	/1961	Air bag compartment	5.V.=5.	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	of codes 004 and 005)		Right side window frame	(100)			RIOR of OCCUPANT'S
(007)	Steering column,		Right side window sill		cover-passenger side and	VEHIC	
10077	transmission selector lever,		Right side window glass	(107)	eyewear		Hood
	other attachment	(103)		(187)	Air bag compartment	(452)	Outside hardware (e.g.,
(008)	Cellular telephone or CB		including one or more of the		cover-passenger side and		outside mirror, antenna)
(000)	radio		following: frame, window		jewelry	(453)	Other exterior surface or
(000)			sill, A (A1/A2)-pillar, B-pillar,	(188)	Air bag compartment		tires (specify):
(003)	Add on equipment (e.g.,	(4.40)	or roof side rail.		cover-passenger side and		4
(010)	tape deck, air conditioner)	(110)	Other right side object		object held		
(010)	Left instrument panel and		(specify):	(189)	Air bag compartment	(454)	Unknown exterior objects
	below				cover-passenger side and		
(011)	Center instrument panel and				object in mouth	EXTER	IIOR OF OTHER MOTOR
	below	INTER	- · ·	(190)	Other air bag (specify)	VEHIC	LE
(012)	Right instrument panel and	(151)	Seat, back support			(501)	Front bumper
	below	(152)	Belt restraint webbing/buckle	(195)	Other air bag compartment	(502)	Hood edge
(013)	Glove compartment door	(153)	Belt restraint B-pillar or door		cover (specify)		Other front of vehicle
(014)	Knee bolster		frame attachment point				(specify):
(015)	Windshield including one or	(154)	Other restraint system				
	more of the following: front		component (specify):	ROOF		(504)	Hood
	header, A (A1/A2)-pillar,			(201)	Front header		Hood ornament
	instrument panel, mirror, or	(155)	Head restraint system	(202)	Rear header		Windshield, roof rail, A-pillar
	steering assembly (driver		Other occupants (specify):	(203)	Roof left side rail		Side surface
	side only)		MIDDLE REAR OCCUPANT				Side mirrors
(016)	Windshield including one or	(161)	Interior loose objects		Roof or convertible top		Other side protrusions
	more of the following: front		Child safety seat (specify):	,,	The contention top	1003)	
	header, A (A1/A2)-pillar,		,,,,,,,,,,,,,,,,,,,,,,,,,,	FLOOI	2		(specify):
	instrument panel, or mirror	(163)	Other interior object		Floor (including toe pan)	(E10)	Page and a
	(passenger side only)	(100,	(specify):		Floor or console mounted		Rear surface
(017)	Windshield reinforced by		(opcony).	(232)			Undercarriage
	exterior object (specify)				transmission lever, including		Tires and wheels
	externer object topoon yy	AIR BA	ve.	(252)	Console	(513)	Other exterior of other moto
(019)	Other front object (specify):		Air bag-driver side		Parking brake handle		vehicle (specify):
(0.0,	other none object (specify).		Air bag-driver side and	(254)	Foot controls including		
		(171)			parking brake	(514)	Unknown exterior of other
LEFT S	SIDE	(172)	eyewear	2542			motor vehicle
	Left side interior surface.	(1/2)	Air bag-driver side and	REAR			
(051)		/4.70\	jewelry		Backlight (rear window)		VEHICLE OR OBJECT IN
	excluding hardware or	(1/3)	Air bag-driver side and object	(302)	Backlight storage rack,	THE EN	NVIRONMENT
	armrests		held		door, etc.	(551)	Ground
(052)	Left side hardware or	(174)	Air bag-driver side and object	(303)	Other rear object (specify):	(598)	Other vehicle or object
	armrest		in mouth				(specify):
	Left A (A1/A2)-pillar	(175)	Air bag compartment				
054)	Left B-pillar		cover-driver side	ADAP'	TIVE (ASSISTIVE) DRIVING	(599)	Unknown vehicle or object
(055)	Other left pillar (specify):	(176)	Air bag compartment	EQUIP	MENT		
			cover-driver side and	(401)	Hand controls for	NONC	ONTACT INJURY
(056)	Left side window glass		eyewear		braking/acceleration		Fire in vehicle
(057)	Left side window frame	(177)	Air bag compartment	(402)	Steering control devices		Flying glass
058)	Left side window sill		cover-driver side and jewelry		(attached to OEM steering		Other noncontact injury
(059)	Left side window glass	(178)	Air bag compartment		wheel)	,000,	source
	including one or more of the		cover-driver side and object	(403)	Steering knob attached to		(specify):
	following: frame, window		held	, ,	steering wheel	(604)	
	sill, A (A1/A2)-pillar, B-pillar,	(179)	Air bag compartment	(405)	Replacement steering wheel		Air bag exhaust gases
	or roof side rail.		cover-driver side and object	,,	(i.e., reduced diameter)	(03/)	Injured, unknown source
060)	Other left side object		in mouth	(ADE)			
	(specify):	(180)	Air bag-passenger side		Joy stick steering controls		
	- · · · · • · ·		Air bag-passenger side and		Wheelchair tie-downs		
		(101)	-	(408)	Modification to seat belts,		
RIGHT	SIDE	(182)	eyewear Air bag-passenger side and	14001	(specify):		
	Right side interior surface,		Air bag-passenger side and	(409)	Additional or relocated		
,	excluding hardware or		jewelry		switches, (specify):		
	armrests			144	Raised roof		

OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

ER:
Restrained?

__ No

<u>√</u> Yes

Blood Alcohol Level (mg/dl)

NOT RECORDED

Glasgow Coma Scale Score A A O X 3 GCSS = ____5

Units of Blood Given

Units = ____

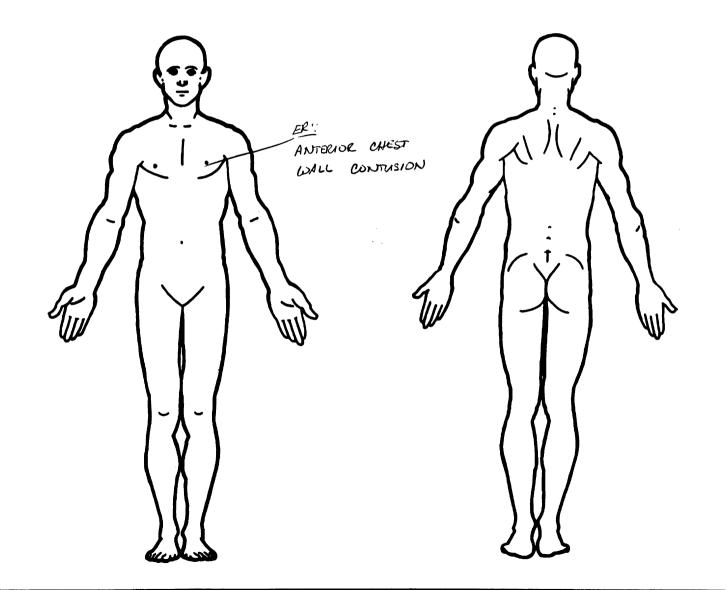
Arterial Blood/Gases

pH = __. PO₂ =

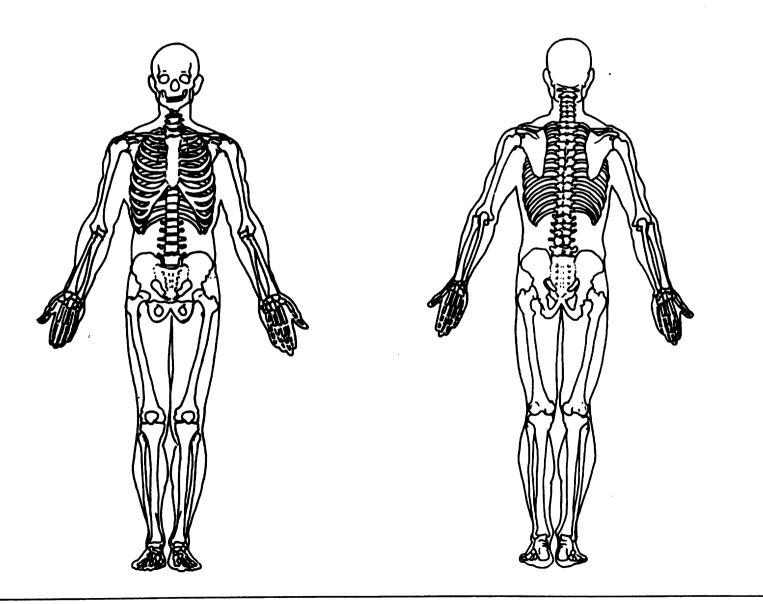
PCO₂

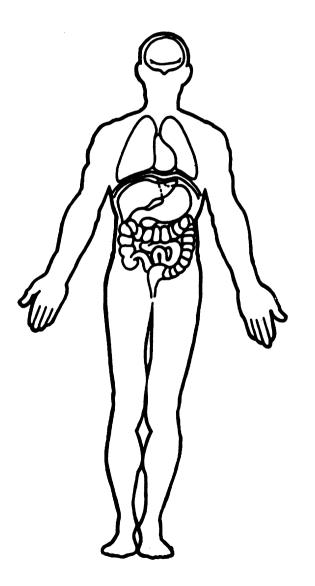
HCO₃

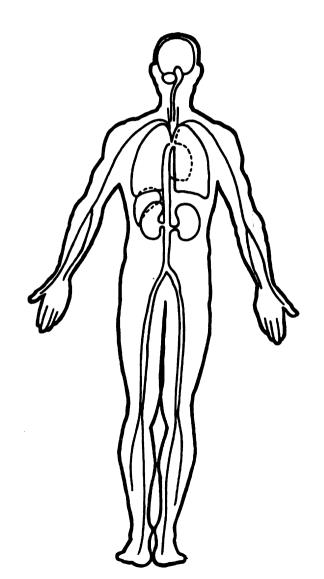
NOT REWEDED



OFFICIAL INJURY DATA - SKELETAL INJURIES







OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM

National Highway Traffic Safety Administration CRASHWORTHINESS DATA SYSTEM **OCCUPANT'S SEATING** 1. Primary Sampling Unit Number 10. Occupant's Seat Position 2. Case Number - Stratum Front Seat (11) Left side 3. Vehicle Number (12) Middle (13) Right side 4. Occupant Number (14) Other (specify): OCCUPANT'S CHARACTERISTICS (15) On or in the lap of another occupant Second Seat 5. Occupant's Age (21) Left side Code actual age at time of accident. (22) Middle (00) Less than one year old (specify by month): (23) Right side (24) Other (specify): (97) 97 years and older (25) On or in the lap of another occupant (99) Unknown Third Seat (31) Left side (32) Middle 6. Occupant's Sex (33) Right side (1) Male (2) Female-not reported pregnant (34) Other (specify): (35) On or in the lap of another occupant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) Fourth Seat (6) Female-pregnant-term unknown (41) Left side (9) Unknown (42) Middle (43) Right side (44) Other (specify): (45) On or in the lap of another occupant 7. Occupant's Height (97) In or on unenclosed area Code actual height to the nearest (98) Other seat (specify): centimeter. (99) Unknown (999) Unknown 6 inches X 2.54 = __ _ centimeters 11. Occupant's Posture 8. Occupant's Weight (0) Normal posture Code actual weight to the nearest kilogram. Abnormal posture (999) Unknown (1) Kneeling or standing on seat (2) Lying on or across seat 160 pounds $\times .4536 = 0.73$ kilograms (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear 9. Occupant's Role window (1) Driver (5) Sitting on a console (2) Passenger (6) Lying back in a reclined seat position (9) Unknown (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

E	JECTION/EI	NTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown 13. Ejection Area (0) No ejection (1) Windshield (2) Left front		15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown 16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc.
(3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, et (specify): (9) Unknown	tc.)	(specify): (9) Unknown 17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or not oriented to time or place (2) Removed from vehicle due to perceived serious injuries (3) Exited vehicle with some assistance
(1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown		(4) Exited vehicle under own power (5) Occupant fully ejected (8) Removed from vehicle for other reasons (specify): (9) Unknown

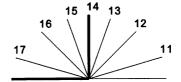
BELT SYSTE	M FUNCTION
18. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt	22. Manual Shoulder Belt Upper Anchorage Adjustment (0) No manual shoulder belt (1) No upper anchorage adjustment for manual shoulder belt Adjustable physical Park Upper Anchorage
(5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify):	Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position (4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment
(9) Unknown 19. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify):	23. Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown
(02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify):	Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24. Automatic (Passive) Belt System Use
(12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat	(0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown
(specify): (99) Unknown if belt used 20. Proper Use of Manual (Active) Belts (0) None used or not available	25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system
(1) None used of not available (1) Belt used properly (2) Belt used properly with child safety seat **Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used	(9) Unknown 26. Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm
improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify):	 (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen
(9) Unknown 21. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used or not available (1) No manual belt failure(s)	(7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt system
(2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify):	(specify): (9) Unknown 27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify):
(9) Unknown	(6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify): (9) Unknown

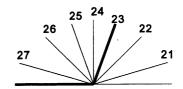
POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	 31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Vehicle inspection [] Official injury data Driver/occupant interview [] Other (specify): [] Unknown if belt used	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown 34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify):

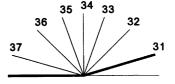
FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (_000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (_996) Deployment, unknown longitudinal Delta V (_997) Not deployed (_998) Unknown if deployed (_999) Unknown
26. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown Bas. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown (99) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed (9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued HEAD RESTRAINT AND SEAT EVALUATION 49. Head Restraint Type/Damage by Occupant 44. Source of Air Bag Damage at This Occupant Position (00) Not equipped/not available (0) No head restraints (01) Not damaged Integral—no damage Integral—damaged during accident (1) (02) Object worn by occupant, (specify): (2) (3) Adjustable – no damage(4) Adjustable – damaged during accident (03) Object carried by occupant, (specify): (5) Add-on—no damage(6) Add-on—damaged during accident (04) Adaptive/assistive controls, (specify): (8) Other (specify): (05) Fire in vehicle (06) Thermal burns (9) Unknown (07) Rescue or emergency efforts (88) Other damage source (specify): 50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (95) Damaged, unknown source (01) Bucket (96) Deployed, unknown if damaged (02) Bucket with folding back (97) Not deployed (03) Bench (98) Unknown if deployed (04) Bench with separate back cushions (99) Unknown (05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) 45. Was The Air Bag Tethered? (08) Pedestal (i.e., column supported) (0) Not equipped/not available (09) Box mounted seat (i.e., van type) (1) No (10) Other seat type (specify): (2) Yes (specify number of tether straps): (99) Unknown (3) Deployed, unknown if tethered (7) Not deployed 51. Seat Orientation (this Occupant Position) (8) Unknown if deployed (0) Occupant not seated or no seat (9) Unknown (1) Forward facing seat 46. Did The Air Bag Have Vent Ports? (2) Rear facing seat (0) Not equipped/not available (3) Side facing seat (inward) (1) No (4) Side facing seat (outward) (2) Yes (specify number of vent ports): (8) Other (specify): (3) Deployed, unknown if vent ports present (9) Unknown (7) Not deployed (8) Unknown if deployed 52. Seat Track Adjusted Position Prior To Impact (9) Unknown (0) Occupant not seated or no seat (1) Non-adjustable seat track 47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? Adjustable Seat Track (0) Not equipped/not available (2) Seat at forward most track position (1) No (3) Seat between forward most and middle track (2) Yes (specify): positions (4) Seat at middle track position (3) Deployed, unknown if other occupant contact (5) Seat between middle and rear most track to air bag positions (7) Not deployed (6) Seat at rear most track position (8) Unknown if deployed (9) Unknown (9) Unknown 48. Was This Occupant Wearing Eye-wear? (0) Not air bag equipped/air bag not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses (4) Deployed, unknown if eyewear worn (7) Not deployed (8) Unknown if deployed (9) Unknown

	HEAD RESTRAINT AND SEA	AT EVALUATION continued
53.	Seat Back Incline Prior and Post Impact (00) Occupant not seated or no seat (01) Not adjustable	
	 Upright prior to impact (11) Moved to completely rearward position (12) Moved to rearward midrange position (13) Moved to slightly rearward position (14) Retained pre-impact position (15) Moved to slightly forward position (16) Moved to forward midrange position (17) Moved to completely forward position 	15 14 16 17
	Slightly reclined prior to impact (21) Moved to completely rearward position (22) Moved to rearward midrange position (23) Retained pre-impact position (24) Moved to upright position (25) Moved to slightly forward position (26) Moved to forward midrange position (27) Moved to completely forward position	25 24 26 27
	Completely reclined prior to impact (31) Retained pre-impact position (32) Moved to rearward midrange position (33) Moved to slightly rearward position (34) Moved to upright position (35) Moved to slightly forward position (36) Moved to forward midrange position (37) Moved to completely forward position	35 34 36 37
	(99) Unknown	
54.	Seat Performance (this Occupant Position) (O) Occupant not seated or no seat (1) No seat performance failure(s) (2) Seat adjusters failed (3) Seat back folding locks or "seat back" failed (specify): (4) Seat track/anchors failed (5) Deformed by impact of occupant (6) Deformed by passenger compartment intrusion, (specify): (7) Combination of above (specify):	
	(8) Other (specify):	
	(o) Chilliann	







	CHILD SAF	ETY SEAT
55.	Child Safety Seat Make/Model (000) No child safety seat	58. Child Safety Seat Harness Usage
	Applicable codes are found in your NASS CDS	
	Data Collection, Coding and Editing	59. Child Safety Seat Shield Usage
	(950) Built-in child safety seat	
	(997) Other make/model (specify):	CO. Shild Sefery Seed Techen House
Ì	(998) Unknown make/model	60. Child Safety Seat Tether Usage
1	(999) Unknown if child safety seat used	Note: Options below applicable to
1		Variables OA58-OA60.
		(00) No child safety seat
56.	Type of Child Safety Seat	Not Designed With Harness/Shield/Tether
	(0) No child safety seat (1) Infant seat	Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether
İ	(2) Toddler seat	added, not used
	(3) Convertible seat	(02) After market harness/shield/tether used
	(4) Booster seat - with shield	(03) Child safety seat used, but no after market
	(5) Booster seat - without shield(7) Other type child safety seat (specify):	harness/shield/tether added (09) Unknown if harness/shield/tether
	(7) Other type child safety seat (specify).	added or used
	(8) Unknown child safety seat type	
	(9) Unknown if child safety seat used	Designed With Harness/Shield/Tether
1	$\wedge \wedge$	(11) Harness/shield/tether not used (12) Harness/shield/tether used
57	Child Safety Seat Orientation	(12) Harness/shield/tether used (19) Unknown if harness/shield/tether used
١٠/٠	(00) No child safety seat	(10) Similaria in mainassi, simalaria in assa
		Unknown If Designed With Harness/Shield/Tether
	Designed for Rear Facing for This Age/Weight	(21) Harness/shield/tether not used
l	(01) Rear facing (02) Forward facing	(22) Harness/shield/tether used (29) Unknown if harness/shield/tether used
l	(08) Other orientation (specify):	(20) Childwill Hamess/shield/tether asca
İ		(99) Unknown if child safety seat used
	(09) Unknown orientation	
l	Designed For Forward Facing for This Age/Weight	
1	(11) Rear facing	
Ì	(12) Forward facing	
	(18) Other orientation (specify):	
1	(19) Unknown orientation	
	(10) Similari Silandisi	
	Unknown Design or Orientation For This	
	Age/Weight, or Unknown Age/Weight (21) Rear facing	
	(22) Forward facing	
	(28) Other orientation (specify):	
	(29) Unknown orientation	
	(99) Unknown if child safety seat used	
	, control of the cont	
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INJURY CONSEQUE	NCES				
	NOES (,
1. Injury Severity (Police Rating)	\subseteq		e Of Medical Facility (for		tment)_C
(0) O - No injury		1	Not treated at a medical	facility	
(1) C - Possible injury			Trauma center		
(2) B - Nonincapacitating injury			Hospital		
(3) A - Incapacitating injury			Medical clinic		
(4) K - Killed			Physician's office Freatment later at medica	al facility.	
(5) U - Injury, severity unknown			Other (specify):	ai racinty	
(6) Died prior to accident		(6)	other (specify).		
(9) Unknown		(9) 1	Jnknown		
	4	1 (5)	SHRHOWH		~ ^
2. Treatment - Mortality		64. Host	oital Stay		$\mathcal{O}($
(0) No treatment			Not Hospitalized		
(1) Fatal		'55'	Code the number of day	vs (up throi	igh 60)
(2) Fatal - ruled disease (specify)):	that	the occupant stayed in I		.g., 00,
			61 days or more		
Nonfatal			Unknown		
					9
(3) Hospitalization(4) Transported and released		65. Worl	king Days Lost		•
(5) Treatment at scene - nontrar	enorted		Code the number of day	/S	
(6) Treatment later	isported	(up t	through 60) that the occ	upant	
(7) Treatment - other (specify):			from work due to the ac	ccident	
(7) Troubline of the (openity).			No working days lost		
(8) Transported to a medical fac	ility-unknown if		61 days or more		
treated	,		Fatally injured		
(9) Unknown			Not working prior to ac Unknown	cident	
EMI	ERGENCY RESPO	ONSE INF	FORMATION		
EMS Notification		EMS	Туре	FIRST UNIT	TRANSPORT
(1) Not notified	ROAD VEHICLE	(01)	Fire department	UNIT	UNIT
(2) Notified (9) Unknown	AIR VEHICLE	(02) (03)	Rescue squad Police department	ROAD	VEHICLE -
(9) Unknown		(03)	Trauma unit		
		(05)	Disaster unit	AIRV	EHICLE
EMS NotificationTime (first unit)		(06)	Ambulance service unit		
(9999) Unknown	ROAD VEHICLE	(07)	Hospital		
	AIR VEHICLE	(08)	Mortuaries/funeral homes	i	
	THE TENDEL	(98) (99)	Other, specifiy: Unknown		
EMS Arrival Time (first unit)		(55)	CIRIOWII		
(9998) EMS cancelled or did	ROAD VEHICLE				
not arrive		EMS			DURING
(9999) Unknown	AIR VEHICLE	(01)	No care administered	ON-SCENE	DURING TRANSPO
		(02)	First aid		VEHICLE -
EMS Departure Time To		(03) (04)	Resuscitation CPR	NOAD	· CI IICLE
Treatment Facility (transporting unit)	ROAD VEHICLE	(04)	Emergency cardiac care	AIR	EHICLE -
(9997) EMS arrived, provided		(06)	Life support system moni		
treatment, but did not	AIR VEHICLE	• •	pulse rate, respiration, Ek		,

AIR VEHICLE STOP WORK HERE VARIABLES 66-74 TO BE CODED BY THE ZONE CENTER

ROAD VEHICLE

(07)

(08)

(98)

(99)

Emergency burn care

Other, specify:

Unknown

Combination of above, specify: __

transport

not used

Unknown

Unknown

EMS Arrival Time At

Treatment Facility

EMS arrived, but was

(9998)

(9999)

(9999)

TO BE CODED BY THE ZONE CENTER

INJURY CONSEQUENCES	TRAUMA DATA
Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured 72. Was the Occupant Given Blood?
67. 1st Medically Reported Cause of Death 68. 2nd Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes	(1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given 73. Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃
 (96) Mode of death given but specific injuries are not linked to cause of death. (specify): (97) Other result (includes fatal ruled disease) (specify): (99) Unknown 	(96) ABGs reported , HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured BELT USE DETERMINATION
70. Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (O) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used



Administration

U.S. Department of Transportation
National Highway Traffic Safety

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

2. Case Number - Stratum

3. Vehicle Number

4. Occupant Number

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

	A.I.S 90								Injury		Occupant
	Source of Injury	Rody	Type of Anatomic	Specific Anatomic	Level of	A.I.S.		Injury	Source Confidence	Direct/ Indirect	Area Intrusion
\	Data	Region	Structure	Structure	Injury	Severity	Aspect	Source	Level	Injury	Number
w	, CVA										
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1st)	6	<i>'</i>	8	9. <u>O</u> <u>2</u>	10. <u>/</u>	11.4	2. <u>00 2</u>	13. <u>—</u>	14.	15. 00
hard	tr										
"My	U F	7	10 9	10 ()	20.02	21 /	,, Z ,	2 (002	-24 2	25 3	26. (5)
tres	ريك. الم	·'·—	18/	19. <u>U</u>	20,	21	22 2	.s	- Z4. <u>-</u>	25	26
	A TUNE										
03rd	1037 July 1827 27. 3	28. 8	29. 9	30. 04	31. 0 2	32. /	33. 2 3	4. 15 1	35. 2	36. /	37. (2)
				···					<u>~</u>		~~~
	*									er Major Major	
4th	38 3	39	40	41	42	43	44 4	5	46. <u> </u>	47	48
	**										
5th	49 5	50	51	52	53	54	55 5	6	57	58	59
li e											
6th	60	61	62	63	64	65	66 6	37	68	69	70
7th	71	72	73	74	75	76	77 7	78,	79	80	81
	1										
8th	82	вз	84,	85	86	87	88 8	39	90	91	92
9th	93.	0.4	95.	oe	97	00	00 1/	oo.	101.	102	103
3111	33 3	J-4	33.		<i>31</i> ,	36 ,	35 IX	.u	. 101.	102	103
	•										
10th	104. 10	05.	106.	107.	108	109.	110. 1	II	112	113.	114.
<u> </u>											

OCCUPANT INJURY DATA										1	
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th						_			-		
12th						_	·				
13th	·					- -				_	
14th											
15th	· <u></u> .:	· .									
16th											
17th		-									-
18th	_										
19th							•				
20th						<u></u>	<u></u> -				
21st						<u></u>			=		
22nd											
23rd											
24th											
25th										. 	

(06) Lumbar

SOURCE OF INJURY DATA

DIRECT/INDIRECT INJURY

OCCUPANT INJURY CLASSIFICATION Level of Injury **Specific Anatomic Aspect Body Region** Structure Head Specific injuries are (1)Right (1) assigned consecutive Left (2) **Face** (2)Vessels, Nerves, Organs. two-digit numbers (3) Bilateral Neck (3)Thorax Bones, Joints are assigned beginning with 02. (4)Central (4)(5) Anterior Abdomen consecutive two digit (5) numbers beginning with To the extent possible, (6) **Posterior** (6) Spine within the organizational (7)**Upper Extremity** 02. Superior (7)framework of the AIS, 00 (8)**Lower Extremity** Inferior (8) is assigned to an injury (9) Unknown (9) Unspecified The exceptions to this rule NFS as to severity or (0) apply to: Whole region where only one injury is given in the dictionary for Type of Anatomic Whole Area (02) Skin - Abrasion that anatomic structure. Structure (04) Skin - Contusion 99 is assigned to any injury NFS as to lesion or Whole Area (06) Skin - Laceration (08) Skin - Avulsion severity. (2) Vessels (10) Amputation (3)Nerves **Abbreviated Injury Scale** Organs (includes (20) Burn (4)(30) Crush Muscles/ligaments) (40) Degloving Minor Injury Skeletal (includes (1)(5)Moderate Injury (50) Injury - NFS (2)ioints) (3) Serious Injury (90) Trauma, other than Head - LOC (6)(4)Severe Injury mechanical Skin (9)Critical Injury (5)(6)Maximum Head - LOC (02) Length of LOC (untreatable) Injured, unknown (7)(04) Level severity (06) of (08) Consciousness (10) Concussion **Spine** Cervical (02) (04) Thoracic

	CONFIDENCE LEVEL	
OFFICIAL RECORDS (1) Autopsy records with or without hospital/medical records (2) Hospital/medical records other than emergency room	(1) Certain (2) Probable (3) Possible (9) Unknown	(1) Direct contact injury (2) Indirect contact injury (3) Noncontact injury (7) Injured, unknown source
 (e.g., discharge summary) (3) Emergency room records only (including associated X-rays or other lab reports) (4) Private physician, walk-in or emergency clinic 		
UNOFFICIAL RECORDS (5) Lay coroner report (6) E.M.S. personnel (7) Interviewee (8) Other source (specify):		
(9) Police		

INJURY SOURCE

	,		INJURY	SOUF	RCES		
FRON'	т	(102)	Right side hardware or	(183)	Air bag-passenger side and	(411)	Wall mounted head rest
(001)	Windshield		armrest		object held	,	(used behind wheel chair)
(002)	Mirror	(103)	Right A (A1/A2)-pillar	(184)	Air bag-passenger side and	(412)	Other adaptive device
(003)	Sunvisor	(104)	Right B-pillar		object in mouth	, 	(specify):
(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185)	Air bag compartment		
(005)	Steering wheel hub/spoke				cover-passenger side		
(006)	Steering wheel (combination	(106)	Right side window glass	(186)	Air bag compartment	EXTER	RIOR of OCCUPANT'S
	of codes 004 and 005)	(107)	Right side window frame		cover-passenger side and	VEHIC	
(007)	Steering column,	(108)	Right side window sill		evewear		Hood
	transmission selector lever,	(109)	Right side window glass	(187)	Air bag compartment		Outside hardware (e.g.,
	other attachment		including one or more of the		cover-passenger side and	, , , , , ,	outside mirror, antenna)
(800)	Cellular telephone or CB		following: frame, window		jewelry	(453)	Other exterior surface or
	radio		sill, A (A1/A2)-pillar, B-pillar,	(188)	Air bag compartment	,,,,,,	tires (specify):
(009)	Add on equipment (e.g.,		or roof side rail.		cover-passenger side and		tilloo tapaanyy.
	tape deck, air conditioner)	(110)	Other right side object		object held		
(010)	Left instrument panel and		(specify):	(189)	Air bag compartment	(454)	Unknown exterior objects
	below		•		cover-passenger side and	(404)	Officiowit extends objects
(011)	Center instrument panel and				object in mouth	FXTER	NOR OF OTHER MOTOR
	below	INTER	IOR	(190)	Other air bag (specify)	VEHIC	
(012)	Right instrument panel and	(151)	Seat, back support			_	Front bumper
	below		Belt restraint webbing/buckle	(195)	Other air bag compartment		Hood edge
(013)	Glove compartment door		Belt restraint B-pillar or door		cover (specify)		Other front of vehicle
(014)	Knee bolster		frame attachment point			(000,	(specify):
(015)	Windshield including one or	(154)	Other restraint system				чареснул.
	more of the following: front		component (specify):	ROOF		(504)	Hood
	header, A (A1/A2)-pillar,				Front header		Hood ornament
	instrument panel, mirror, or	(155)	Head restraint system		Rear header		
	steering assembly (driver		Other occupants (specify):		Roof left side rail		Windshield, roof rail, A-pillar Side surface
	side only)		the companie (appenie),		Roof right side rail		Side mirrors
(016)	Windshield including one or	(161)	Interior loose objects		Roof or convertible top		
	more of the following: front		Child safety seat (specify):	(200)	noor or convertible top	(509)	Other side protrusions
	header, A (A1/A2)-pillar,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Cima servicy sour (specify).	FLOOI	,		(specify):
	instrument panel, or mirror	(163)	Other interior object		Floor (including toe pan)	/E10\	Page audien
	(passenger side only)		(specify):		Floor or console mounted		Rear surface
(017)	Windshield reinforced by		(open, y).	(232)	transmission lever, including		Undercarriage
	exterior object (specify)				console		Tires and wheels
		AIR BA	AG.	(253)	Parking brake handle	(513)	Other exterior of other motor
(019)	Other front object (specify):		Air bag-driver side		Foot controls including		vehicle (specify):
			Air bag-driver side and	(204)	parking brake	/E 1 4\	Halana
		*****	eyewear		parking brake	(5 (4)	Unknown exterior of other
LEFT S	SIDE	(172)	Air bag-driver side and	REAR			motor vehicle
(051)	Left side interior surface,	· · · · · · · · · · · · · · · · · · ·	jewelry		Backlight (rear window)	OTHE	VEHICLE OF OR ISSE
	excluding hardware or	(173)	Air bag-driver side and object		Backlight storage rack,		R VEHICLE OR OBJECT IN
	armrests		held	(302)			NVIRONMENT
(052)	Left side hardware or	(174)	Air bag-driver side and object	(303)	Other sees object (consider)		Ground
	armrest	(,,,,,	in mouth	(303)	Other rear object (specify):	(598)	Other vehicle or object
(053)	Left A (A1/A2)-pillar	(175)	Air bag compartment				(specify):
	Left B-pillar		cover-driver side	ADAD	TIVE (ASSISTIVE) DRIVING	1500	Halana and All Andrews
	Other left pillar (specify):	(176)	Air bag compartment			(599)	Unknown vehicle or object
	Carrier piner (appenly).	,0/	cover-driver side and	EQUIP		Neve	0MTA 0T IN III C
056)	Left side window glass			(401)	Hand controls for		ONTACT INJURY
	Left side window grass	(177)	eyewear Air had compartment	1400	braking/acceleration		Fire in vehicle
	Left side window sill	(177)	Air bag compartment	(402)	Steering control devices		Flying glass
	Left side window slit	(170)	Cover-driver side and jewelry		(attached to OEM steering	(603)	Other noncontact injury
	including one or more of the	(1/0)	Air bag compartment	1400	wheel)		source
	following: frame, window		cover-driver side and object	(403)	Steering knob attached to		(specify):
		(170)	held	1405	steering wheel		Air bag exhaust gases
	sill, A (A1/A2)-pillar, B-pillar, or roof side rail.	(1/9)	Air bag compartment	(405)	Replacement steering wheel	(697)	Injured, unknown source
060)			cover-driver side and object	,	(i.e., reduced diameter)		
JJ01	Other left side object	(190)	in mouth		Joy stick steering controls		
	(specify):		Air bag-passenger side		Wheelchair tie-downs		
		(161)	Air bag-passenger side and	(408)	Modification to seat belts,		
RIGHT	SIDE	(102)	eyewear	(400)	(specify):		
	-		Air bag-passenger side and	(409)	Additional or relocated		
	Right side interior surface,		jewelry		switches, (specify):		
	excluding hardware or						
	armrests				Raised roof		

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OFFICIAL INJURY DATA - SOFT TISSUE INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.) 200 NO

Restrained? Blood Alcohol Level (mg/dl)

NOT RECORDED

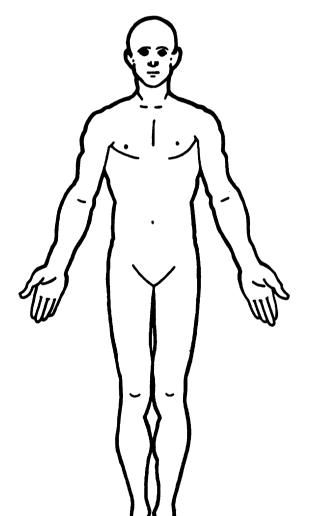
Glasgow Coma Scale Score
A 8 0 x 3
GCSS = 15

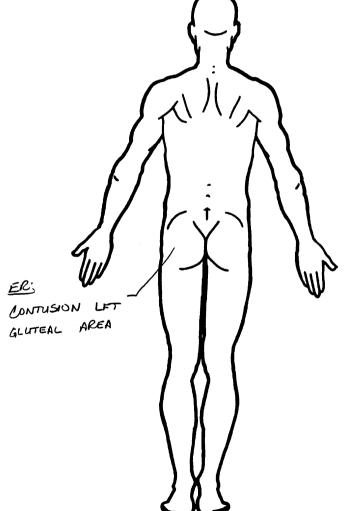
Units of Blood Given

Units ≈

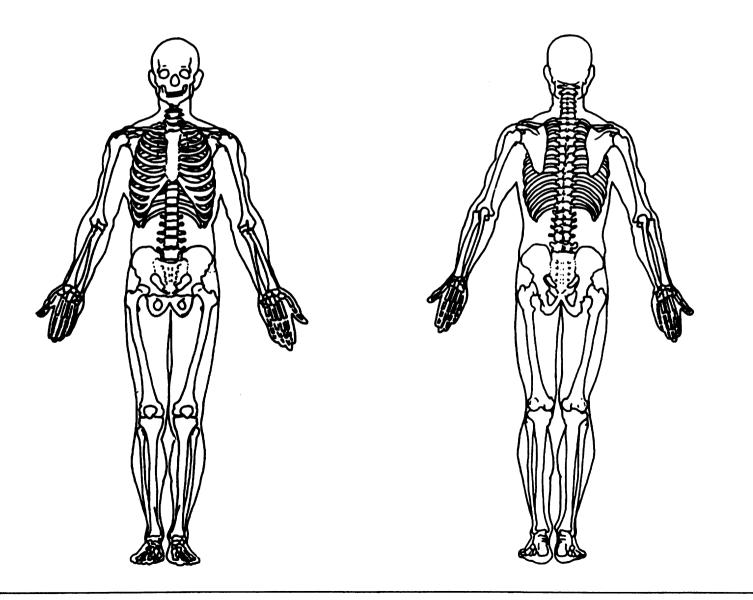
Arterial Blood Gases

NO RECURDED

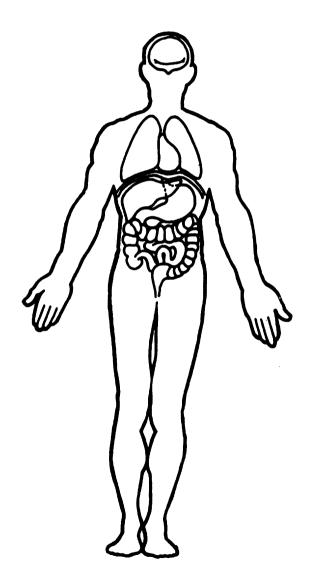


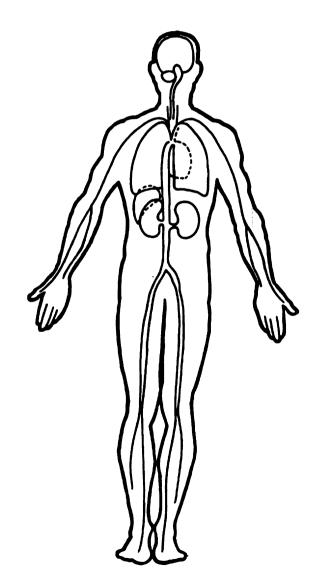


Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





UPDATE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 2. Case Number — Stratum 3. Vehicle Number 4. Occupant Number RECEIVED 19924	Other Information: (Sanitize this section prior to Update submission.)
STATUS OF OCCUP	ANT INFORMATION
STATUS OF OCCUP INITIAL UPDATED SUBMISSION INFORMATION OAL08. Date Official Medical Data Requested OAL09. Date Official Medical Data Obtained OAL16. Injury Treatment Status OAL17. Injury Information Official a. Autopsy (invasive examination) B. D. Post-ER medical record which includes information about death based on non-invasive examination c. Admission record/summary or admission/discharge face sheet d. Discharge summary e. Operative report f. Radiographic record(s) (X-ray, CT scan) g. History and physical examination and/or consultation records h. Emergency room records (includes nurses' notes) j. Private physician Unofficial k. Lay coroner l. EMS record m. Interviewee n. Other source (specify): B. B. B. C. Police report B. B. B. OAL17. Injury Information SUBMISSION INFORMATION 9 7 OS DETERMINENT OF THE SUBMISSION INFORMATION 9 7 OS DETERMINENT OF THE SUBMISSION INFORMATION 9 9 7 OS DETERMINENT OF THE SUBMISSION INFORMATION 9 9 7 OS DETERMINENT OF THE SUBMISSION INFORMATION 9 1	ANT INFORMATION INITIAL SUBMISSION OAL18. Medical Facility Code GV14. Alcohol Test Results For Driver GV16. Other Drug Specimen Test Type For Driver OA05. Occupant's Age OA06. Occupant's Sex OA07. Occupant's Height OA08. Occupant's Weight OA08. Treatment-Mortality OA62. Type of Medical Facility (for Initial Treatment) OA63. Hospital Stay

OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

National Highway Traffic Safety Administration **OCCUPANT'S SEATING** 1. Primary Sampling Unit Number 10. Occupant's Seat Position 2. Case Number - Stratum Front Seat (11) Left side 3. Vehicle Number (12) Middle (13) Right side 4. Occupant Number (14) Other (specify): **OCCUPANT'S CHARACTERISTICS** (15) On or in the lap of another occupant Second Seat 5. Occupant's Age (21) Left side Code actual age at time of accident. (22) Middle (00) Less than one year old (specify by month): (23) Right side (97) 97 years and older (24) Other (specify): (25) On or in the lap of another occupant (99) Unknown Third Seat (31) Left side 6. Occupant's Sex (32) Middle (33) Right side (1) Male (34) Other (specify): (2) Female-not reported pregnant (35) On or in the lap of another occupant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) Fourth Seat (41) Left side (6) Female-pregnant-term unknown (42) Middle (9) Unknown (43) Right side (44) Other (specify): (45) On or in the lap of another occupant 7. Occupant's Height Code actual height to the nearest (97) In or on unenclosed area (98) Other seat (specify): centimeter. (99) Unknown (999) Unknown / inches X 2.54 = 11. Occupant's Posture 8. Occupant's Weight (0) Normal posture Code actual weight to the nearest kilogram. Abnormal posture (999) Unknown (1) Kneeling or standing on seat (2) Lying on or across seat 65 pounds x .4536 = 0 Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear 9. Occupant's Role window (1) Driver (5) Sitting on a console (2) Passenger (6) Lying back in a reclined seat position (9) Unknown (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

EJECTION/ENTRAPMENT				
Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify):	CTION/E	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown 16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify): (9) Unknown 17. Occupant Mobility (0) Occupant fatal before removed from vehicle		
Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown		 (1) Removed from vehicle while unconscious or not oriented to time or place (2) Removed from vehicle due to perceived serious injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (8) Removed from vehicle for other reasons (specify): (9) Unknown 		

BELT SYSTEM FUNCTION			
18. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify): (9) Unknown 19. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat (15) Belt used with child safety seat (15) Belt used with child safety seat (16) Onher belt used with child safety seat (17): (18) Other belt used with child safety seat (19) Unknown if belt used 20. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify): (9) Unknown 21. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included)	V FUNCTION 22. Manual Shoulder Belt Upper Anchorage Adjustment (O) No manual shoulder belt (1) No upper anchorage adjustment for manual shoulder belt Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position (4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment 23. Automatic (Passive) Belt System Availability/Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24. Automatic (Passive) Belt System Use (O) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt in use (3) Automatic belt use unknown (9) Unknown 25. Automatic (Passive) Belt System Type (O) Not equipped/not available (1) Non-motorized system (2) Motorized system (2) Motorized system (2) Motorized system (3) Automatic belt used properly (2) Automatic belt used properly (3) Automatic belt used properly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt used properly (3) Automatic belt used improperly (3) Automatic belt used improperly (4) Automatic belt used improperly (5) Automatic belt used improperly (6) Not equipped/not available/not used (1) Automatic belt used improperly (1) Automatic belt used improperly (2) Automatic belt used improperly (3) Automatic shoulder belt worn on abdomen (4) Automatic shoulder belt used improperly (5) Automatic shoulder belt used improperly (6) Noter improper use of automatic belt system (7) Automatic shoulder belt used improperly (8) Other improper use of automatic belt system (8) Unknown		
safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used	(specify): (3) Automatic belt use unknown (9) Unknown 25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system		
(0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat **Belt Used Improperly** (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify): (9) Unknown 21. Manual (Active) Belt Failure Modes	(2) Motorized system (9) Unknown 26. Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly		
During Accident (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not	(8) Other improper use of automatic belt system (specify):		

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	31. Frontal Air Bag System Deployment (This Occupant Position) (O) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Vehicle inspection [] Official injury data Driver/occupant interview [] Other (specify): [] Unknown if belt used	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown 34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available
	(1) No (2) Yes (specify): (9) Unknown

FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION			
35. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (_000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (_996) Deployment, unknown longitudinal Delta V (_997) Not deployed (_998) Unknown if deployed (_999) Unknown		
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed		
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown	(9) Unknown 42. Were Air Bag Module Cover Flap(s) Damaged? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged		
38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(7) Not deployed (8) Unknown if deployed (9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn		
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown		

HEAD RESTRAINT AND SEAT EVALUATION continued

- 53. Seat Back Incline Prior and Post Impact
 - (00) Occupant not seated or no seat
 - (01) Not adjustable

Upright prior to impact

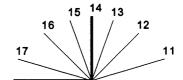
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

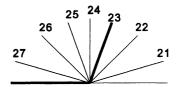
Slightly reclined prior to impact

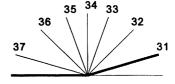
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
 - (0) Occupant not seated or no seat
 - (1) No seat performance failure(s)
 - (2) Seat adjusters failed
 - (3) Seat back folding locks or "seat back" failed (specify):
 - (4) Seat track/anchors failed
 - (5) Deformed by impact of occupant
 - (6) Deformed by passenger compartment intrusion, (specify):
 - (7) Combination of above (specify):
 - (8) Other (specify):
 - (9) Unknown







CHILD SA	FETY SEAT
55. Child Safety Seat Make/Model (000) No child safety seat	58. Child Safety Seat Harness Usage
Applicable codes are found in your NASS CDS Data Collection, Coding and Editing (950) Built-in child safety seat	59. Child Safety Seat Shield Usage
(997) Other make/model (specify): (998) Unknown make/model (999) Unknown if child safety seat used	60. Child Safety Seat Tether Usage Note: Options below applicable to
56. Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat - with shield (5) Booster seat - without shield (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used 57. Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (18) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (29) Unknown orientation	Variables OA58-OA60. (00) No child safety seat Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/Tether added or used Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used

INJURY CONSEQUEN	ICES	
61. Injury Severity (Police Rating) (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown 62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):		63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify): (9) Unknown 64. Hospital Stay (00) Not Hospitalized Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown
Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontrans (6) Treatment later (7) Treatment - other (specify): (8) Transported to a medical facili treated (9) Unknown	·	65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown
EME	RGENCY RESPO	PONSE INFORMATION
EMS Notification (1) Not notified (2) Notified (9) Unknown	ROAD VÉHICLE	(02) Rescue squad
EMS NotificationTime (first unit) (9999) Unknown	ROAD VÉHICLE	(05) Disaster unit (06) Ambulance service unit (07) Hospital (08) Mortuaries/funeral homes (98) Other, specifiy: (99) Unknown
EMS Arrival Time (first unit) (9998) EMS cancelled or did not arrive	ROAD VEHICLE	- FMS Care
(9999) Unknown	AIR VEHICLE	(01) No care administered ON-SCENE TRANSPORT (02) First aid (03) Resuscitation
EMS Departure Time To Treatment Facility (transporting unit) (9997) EMS arrived, provided treatment, but did not transport	ROAD VEHICLE	(04) CPR (05) Emergency cardiac care (06) Life support system monitoring (blood pressure, pulse rate, respiration, EKG) (07) Emergency burn care
(9998) EMS arrived, but was not used (9999) Unknown	,	(08) Combination of above, specify:(98) Other, specify:(99) Unknown
EMS Arrival Time At Treatment Facility (9999) Unknown	ROAD VEHICLE	-

AIR VEHICLE

STOP WORK HERE VARIABLES 66-74 TO BE CODED BY THE ZONE CENTER

TO BE CODED BY THE ZONE CENTER

TO BE GODED BY	THE ZONE GENTER
INJURY CONSEQUENCES	TRAUMA DATA
Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death 68. 2nd Medically Reported Cause of Death 69. 3rd Medically Reported Cause of Death	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given
Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify):	73. Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
(97) Other result (includes fatal ruled disease) (specify):	BELT USE DETERMINATION
(99) Unknown 70. Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used



Administration

U.S. Department of Transportation National Highway Traffic Safety

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

2. Case Number - Stratum

2. Case Number - Stratum

3. Vehicle Number

4. Occupant Number

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

	A.I.S 90					Injury		Occupa			
	n Data	y Body	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area Intrusio Numbe
y pe	لطالع										
1st	57	67	7. <u>4</u>	8. <u>04</u>	9. <u>0 2</u>	~10. <u>/</u>	11. <u>2</u>	-12. <u> 51</u>	_ 13. <u>3</u> _	14/_	15. <u>O</u> U
2nd	16	17	18	19	20	21	22	23	24	25	26
3rd	27	28	29	30	31	32	33	34	_ 35	36	37
4th	38.	39.	40.	41.	42.	43,	44	45.	46.	47	48
	<u> </u>										
								.		60	5 0
5th	49	50	51	b2	53	54,	55	56	_ 57	58	59
6th	60	61	62	63	64	65	66	67	68	69	70
7th	7.1	72	73	74	75	76	77	78	79	80	81
8th	82.	83.	84.	85.	86.	87.	88.	89.	90.	91.	92.
										400	100
9th	93	94	95	96	97	98	99	100	_ 101	102	103
	•										
10th	104	105	106	107	108	109	110	111	112	113	114

HS Form 433B (1/96)

This report is authorized by P.L. 89-563, Title 1, Section 106, 108, and 112. While you are not required to respond, your cooperation is needed to make the results of this data collection effort comprehensive, accurate, and timely.

OCCUPANT INJURY CLASSIFICATION

Body Region Head (2) Face Neck (3)(4)Thorax (5) Abdomen (6)Spine **Upper Extremity** (7)**Lower Extremity** (8) (9) Unspecified Type of Anatomic

Structure

- (1)Whole Area Vessels (2)Nerves (3)
- (4) Organs (includes Muscles/ligaments) Skeletal (includes
- (5) joints)
- Head LOC (6)
- (9) Skin

Specific Anatomic Structure

Vessels, Nerves, Organs. Bones. Joints are assigned consecutive two digit numbers beginning with 02.

The exceptions to this rule apply to:

Whole Area

- (02) Skin Abrasion (04) Skin - Contusion (06) Skin - Laceration (08) Skin - Avulsion (10) Amputation
- (20) Burn (30) Crush
- (40) Degloving (50) Injury - NFS
- (90) Trauma, other than mechanical

Head - LOC

(02) Length of LOC

- (04) Level (06) of
- (08) Consciousness
- (10) Concussion

Spine

(02) Cervical (04) Thoracic (06) Lumbar

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor Injury
- Moderate Injury (2)(3) Serious Injury
- (4) Severe Injury
- Critical Injury (5)
- (6)Maximum
- (untreatable) (7)Injured, unknown
- severity

Aspect

- Right (2) Left
- (3)Bilateral
- (4)Central (5) Anterior
- (6) **Posterior**
- (7)Superior
- (8)Inferior
- (9)Unknown
- (0) Whole region

DIRECT/INDIRECT INJURY INJURY SOURCE SOURCE OF INJURY DATA CONFIDENCE LEVEL OFFICIAL RECORDS (1) Certain

(2) Probable

(3) Possible

(9) Unknown

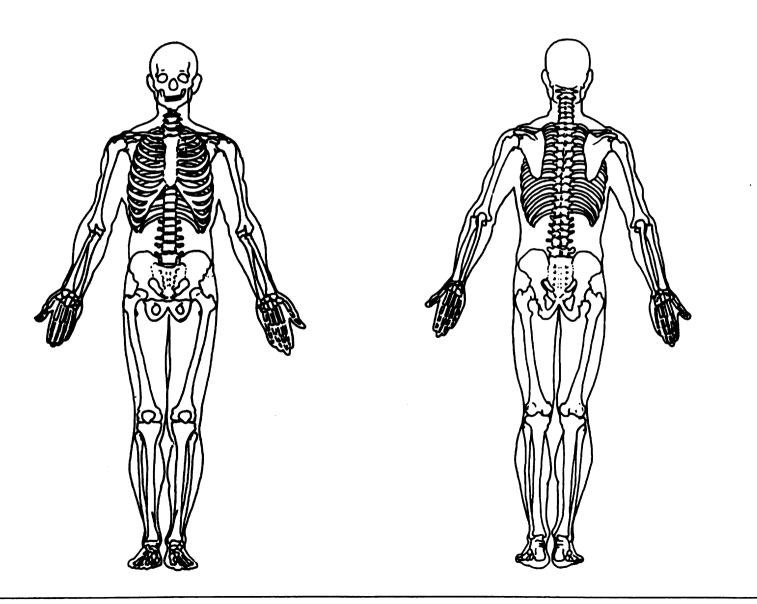
- (1) Autopsy records with or without hospital/medical
- records (2) Hospital/medical records other than emergency room
- (e.g., discharge summary) (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic
 - **UNOFFICIAL RECORDS**
- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

- Direct contact injury
- Indirect contact injury (2)
- (3) Noncontact injury
- (7) Injured, unknown source

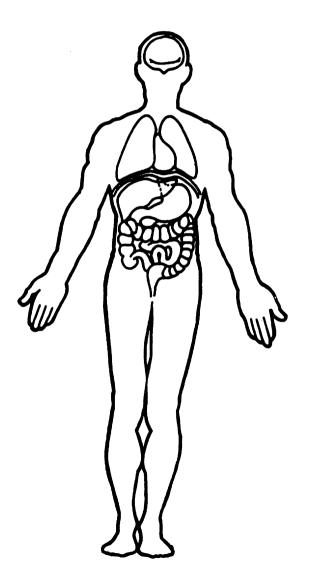
			INJURY	-	1020		`
FRON	т	(102)	Right side hardware or	(183)	Air bag-passenger side and	(411)	Wall mounted head rest
(001)	Windshield		armrest		object held		(used behind wheel chair)
	Mirror	(103)	Right A (A1/A2)-pillar	(184)	Air bag-passenger side and	(412)	Other adaptive device
(003)	Sunvisor	(104)	Right B-pillar		object in mouth		(specify):
(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185)	Air bag compartment		
	Steering wheel hub/spoke				cover-passenger side		
(006)	Steering wheel (combination		Right side window glass	(186)	Air bag compartment	EXTER	RIOR of OCCUPANT'S
	of codes 004 and 005)	(107)	Right side window frame		cover-passenger side and	VEHIC	CLE
(007)	Steering column,		Right side window sill		eyewear	(451)	Hood
	transmission selector lever,	(109)	Right side window glass	(187)	Air bag compartment	(452)	Outside hardware (e.g.,
	other attachment		including one or more of the		cover-passenger side and		outside mirror, antenna)
(008)	Cellular telephone or CB		following: frame, window		jewelry	(453)	Other exterior surface or
	radio		sill, A (A1/A2)-pillar, B-pillar,	(188)	Air bag compartment		tires (specify):
(009)	Add on equipment (e.g.,		or roof side rail.		cover-passenger side and		
	tape deck, air conditioner)	(110)	Other right side object		object held		
(010)	Left instrument panel and		(specify):	(189)	Air bag compartment	(454)	Unknown exterior objects
	below				cover-passenger side and		
(011)	Center instrument panel and				object in mouth	EXTER	NOR OF OTHER MOTOR
	below	INTER		(190)	Other air bag (specify)	VEHIC	LE
(012)	Right instrument panel and		Seat, back support			(501)	Front bumper
	below		Belt restraint webbing/buckle	(195)	Other air bag compartment		Hood edge
	Glove compartment door	(153)	Belt restraint B-pillar or door		cover (specify)	(503)	Other front of vehicle
	Knee bolster		frame attachment point				(specify):
(015)	Windshield including one or	(154)	Other restraint system				
	more of the following: front		component (specify):	ROOF		(504)	
	header, A (A1/A2)-pillar,				Front header	(505)	Hood ornament
	instrument panel, mirror, or		Head restraint system	(202)	Rear header	(506)	Windshield, roof rail, A-pilla
	steering assembly (driver	(160)	Other occupants (specify):		Roof left side rail	(507)	Side surface
	side only)			(204)	Roof right side rail	(508)	Side mirrors
(016)	Windshield including one or		Interior loose objects	(205)	Roof or convertible top	(509)	Other side protrusions
	more of the following: front	(162)	Child safety seat (specify):				(specify):
	header, A (A1/A2)-pillar,			FLOOR	₹		
	instrument panel, or mirror	(163)	Other interior object	(251)	Floor (including toe pan)	(510)	Rear surface
	(passenger side only)		(specify):	(252)	Floor or console mounted	(511)	Undercarriage
(017)	Windshield reinforced by				transmission lever, including	(512)	Tires and wheels
	exterior object (specify)				console	(513)	Other exterior of other motor
		AIR BA	· -	(253)	Parking brake handle		vehicle (specify):
(019)	Other front object (specify):		Air bag-driver side	(254)	Foot controls including		
		(171)	Air bag-driver side and		parking brake	(514)	Unknown exterior of other
			eyewear				motor vehicle
LEFT S		(172)	Air bag-driver side and	REAR			
(051)	Left side interior surface,		jewelry		Backlight (rear window)	OTHER	R VEHICLE OR OBJECT IN
	excluding hardware or	(173)	Air bag-driver side and object	(302)	Backlight storage rack,	THE E	NVIRONMENT
	armrests		held		door, etc.	(551)	Ground
(052)	Left side hardware or	(174)	Air bag-driver side and object	(303)	Other rear object (specify):	(598)	Other vehicle or object
	armrest		in mouth				(specify):
	Left A (A1/A2)-pillar	(175)	Air bag compartment				
(054)	Left B-pillar		cover-driver side	ADAP	TIVE (ASSISTIVE) DRIVING	(599)	Unknown vehicle or object
(055)	Other left pillar (specify):	(176)	Air bag compartment	EQUIP	MENT		
			cover-driver side and	(401)	Hand controls for	NONC	ONTACT INJURY
(056)	Left side window glass		eyewear		braking/acceleration	(601)	Fire in vehicle
(057)	Left side window frame	(177)	Air bag compartment	(402)	Steering control devices	(602)	Flying glass
(058)			cover-driver side and jewelry		(attached to OEM steering	(603)	Other noncontact injury
(059)	Left side window glass	(178)	Air bag compartment		wheel)		source
	including one or more of the		cover-driver side and object	(403)	Steering knob attached to		(specify):
	following: frame, window		heid		steering wheel	(604)	Air bag exhaust gases
	sill, A (A1/A2)-pillar, B-pillar,	(179)	Air bag compartment	(405)	Replacement steering wheel		Injured, unknown source
	or roof side rail.		cover-driver side and object		(i.e., reduced diameter)		
(060)	Other left side object		in mouth	(406)	Joy stick steering controls		
	(specify):	(180)	Air bag-passenger side		Wheelchair tie-downs		
		(181)	Air bag-passenger side and	(408)	Modification to seat belts,		
			eyewear		(specify):		
RIGHT	SIDE	(182)	Air bag-passenger side and	(409)	Additional or relocated		
	Diabt side interior surface		jewelry		switches, (specify):		
	Right side interior surface,						
	excluding hardware or						

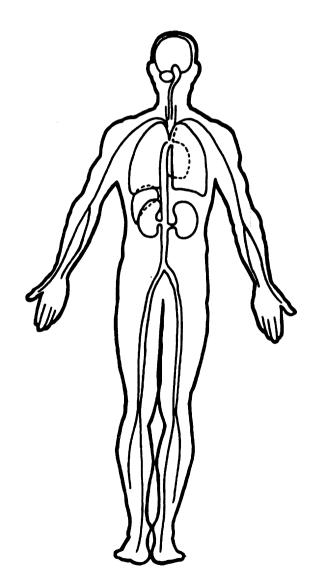
OFFICIAL INJURY DATA - SOFT TISSUE INJURIES Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.) Restrained? **Blood Alcohol Level** (mg/dl) BAL = ____ Glasgow Coma Scale Score GCSS = ____ Units of Blood Given Units = **Arterial Blood Gases** pH = _.__ PCO₂ HCO₃

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





	PRECRASH ENVIRONMENTAL DATA				1
			25.	Roadway Surface Condition	/
				(1) Dry	
19.	Relation To Interchange Or Junction ()	l		
	(0) Non-interchange area and non-junction		1	(2) Wet	
				(3) Snow or slush	
	(1) Interchange area related				
			ŀ	(4) Ice	
l	At the terminal control		l	(5) Sand, dirt, or oil	
l	Non-Interchange junctions		l		
i	(2) Intersection related		1	(8) Other (specify):	
1	(3) Driveway, alley access related		1	(9) Unknown	
1				, , , , , , , , , , , , , , , , , , , ,	_
1	(4) Other junction (specify)		1		2
l	•		ا مم	11. b. 0 10.	
ı			ZO.	Light Conditions	
l	(5) Unknown type of junction		l	(1) Daylight	
l			1	(2) Dark	
l	(9) Unknown		l		
l	(9) Olikilowii		l	(3) Dark, but lighted	
l				(4) Dawn	
		()		(5) Dusk	
20.	Trafficway Flow			(9) Unknown	
	(0) Not physically divided (two way traffic)		1	(0)	
			•		~
	(1) Divided trafficway-median strip without				1
l	positive barrier		27	Atmospheric Conditions	ノー
l	(2) Divided trafficway-median strip with positive		٠, ٢		
l	·	ve j	l	(0) No adverse atmospheric-related driving	
	barrier			conditions	
	(3) One way traffic		•		
				(1) Rain	- 1
	(9) Unknown			(2) Sleet/hail	
		1		(3) Snow	
		/			
21.	Number Of Travel Lanes			(4) Fog	
	· ·			(5) Rain and fog	- 1
	(1) One		l	(6) Sleet and fog	
	(2) Two		l		
l	(3) Three		l	(7) Other (e.g., smog, smoke, blowing sand or	
			1	dust, etc.) (specify):	
	(4) Four			addity didity (opedity).	
	(5) Five		1		.
	(6) Six			(9) Unknown	1
	• •		l	(- 1
	(7) Seven or more		مما	Tariffic Control Day in	ノー
	(9) Unknown		20.	Traffic Control Device	
		1	ŀ	(0) No traffic control(s)	
			Ì	(1) Traffic control signal (not RR crossing)	
22	Roadway Alignment	1	1	(1) Traine control signal (not fill clossing)	
22.			l		
1	(1) Straight		İ	Regulatory	
I	(2) Curve right		l	(2) Stop sign	
I					
I	(3) Curve left		l	(3) Yield sign	
I	(9) Unknown		l	(4) School zone sign	
I		1	l	(5) Other regulatory sign (specify):	
I		1	1	(a) action regulatory digit (appoints).	
23	Roadway Profile	I			
~ ~.	· · · · · · · · · · · · · · · · · · ·		ļ.	(6) Warning sign (not RR crossing)	
	(1) Level			(7) Unknown sign	
	(2) Uphill grade (>2%)				
	(3) Hill crest		1	(8) Miscellaneous/other controls including RR	
			1	controls (specify):	
	(4) Downhill grade (>2%)		l	501111 515 (Sp5011),1	
l	(5) Sag		I		
	(9) Unknown		1	(9) Unknown	
	(3) Ulikhowii				
		~)	l		1
l			l	()
24.	Roadway Surface Type		29.	Traffic Control Device Functioning	/
l	(1) Concrete		I	(O) No traffic control device	
I			l		
	(2) Bituminous (asphalt)		i	(1) Traffic control device not functioning	
	(3) Brick or block		l	(specify):	
l	•••		l	/>pad	
	(4) Slag, gravel, or stone				
	(5) Dirt		l	(2) Traffic control device functioning properly	
	(8) Other (specify):			(9) Unknown	
			I	,-,	
	/O\ Llakaawa				
	(9) Unknown		1		

National Accident Sampling System-Crashworthiness Da	ta System: General Vehicle Form Page 5
OCCUPANT RELATED	44. Vehicle Cargo Weight 9,990
37. Driver Presence in Vehicle (0) Driver not present (1) Driver present (9) Unknown	Code weight to nearest 10 kilograms. (000) Less than 5 kilograms (454) 4,536 kilograms or more (999) Unknown
38. Number of Occupants This Vehicle (00-96) Code actual number of occupants for this vehicle (97) 97 or more (99) Unknown	Source:kgs ROLLOVER DATA 45. Rollover
39. Number of Occupant Forms Submitted	(00) No rollover (no overturning)
AIR BAG RELATED 40. Is this an AOPS Vehicle? (0) No (includes unknown) (1) Yes - researcher determined (2) VIN determined air bag system (3) VIN determined automatic (passive) belts (4) VIN determined air bag and automatic (passive) belts	Rollover (primarily about the longitudinal axis) (01-16) Code the number of quarter turns (17) Rollover, 17 or more quarter turns (specify): (98) Rollover-end-over-end (i.e., primarily about the lateral axis) (99) Rollover (overturn), details unknown 46. Rollover Initiation Type (00) No rollover (01) Trip-over
41. Air Bag(s) Deployment, First Seat Frontal (0) Not equipped or not available (1) No air bags deployed Single Air Bag Vehicle (2) Driver air bag deployed (3) Driver air bag, unknown if deployed Multiple Air Bag Vehicle (4) Driver side only deployed (5) Passenger side only deployed (6) Driver and passenger side deployed (7) Driver and passenger side unknown if deployed (8) Air bag(s) deployed, details unknown (9) Unknown	(01) Trip-over (02) Flip-over (03) Turn-over (04) Climb-over (05) Fall-over (06) Bounce-over (07) Collision with another vehicle (08) Other rollover initiation type specify): (98) Rolloverend-over-end (99) Unknown rollover initiation type 47. Location of Rollover Initiation (0) No rollover (1) On roadway (2) On shoulder—paved
42. Air Bag(s) Deployment, Other Than First Seat Frontal (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown Specify type of "other" air bag present:	(3) On shoulder—unpaved (4) On roadside or divided trafficway median (8) Rolloverend-over-end (9) Unknown 48. Rollover Initiation Object Contacted (Note: Applicable codes on back of page) 49. Location on Vehicle Where Initial Principal Tripping Force Is Applied (0) No rollover (1) Wheels/tires (2) Side plane (3) End plane (4) Undercarriage (5) Other location on vehicle (specify):
	(6) Non-contact rollover forces (specify):
VEHICLE WEIGHT ITEMS	(8) Rolloverend-over-end (9) Unknown
43. Vehicle Curb Weight Code weight to nearest 10 kilograms. (045) Less than 454 kilograms (612) 6,124 kilograms or more (999) Unknown O 2, O O lbs X 4536 =	50. Direction of Initial Roll (0) No rollover (1) Roll right - primarily about the longitudinal axis (2) Roll left - primarily about the longitudinal axis (8) Rolloverend-over-end (9) Unknown roll direction

Source:

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover (01-30) — Vehicle Number	(57) Fence (58) Wall
Noncollision	(59) Building (60) Ditch or culvert
(31) Turn-over — fall-over	(61) Ground
(32) No rollover impact initiation (end-over-end)	(62) Fire hydrant
(34) Jackknife	(63) Curb
(o i) adominio	(64) Bridge
Collision With Fixed Object	(68) Other fixed object (specify):
(41) Tree (≤ 10 cm in diameter)	(oc) cinci inter object toposity);
(42) Tree (> 10 cm in diameter)	(69) Unknown fixed object
(43) Shrubbery or bush	
(44) Embankment	Collision with Nonfixed Object
(,	(70) Passenger car, light truck, van, or other
(45) Breakaway pole or post (any diameter)	vehicle not in-transport
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(71) Medium/heavy truck or bus not in-transport
Nonbreakaway Pole or Post	(76) Animal
(50) Pole or post (≤ 10 cm in diameter)	(77) Train
(51) Pole or post (> 10 cm but ≤ 30 cm in	(78) Trailer, disconnected in transport
diameter)	(79) Object fell from vehicle in-transport
(52) Pole or post (> 30 cm in diameter) (53) Pole or post (diameter unknown)	(88) Other nonfixed object (specify):
	(89) Unknown nonfixed object
(54) Concrete traffic barrier	•
(55) Impact attenuator	(98) Other event (specify):
(56) Other traffic barrier (includes guardrail)	• •
(specify):	(99) Unknown event or object

PSU NUMBER
CASE NUMBER
VEHICLE NUMBER

04 201E 02

EXTERIOR VEHICLE FORM

THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:

[9	ENTIRE FORM
[]	PAGE NUMBER (S)

PSU NUMBER
CASE NUMBER
VEHICLE NUMBER

201E 02

INTERIOR VEHICLE FORM

THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:

Ŋ	Entire Form
[]	PAGE NUMBER (S)

OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

4. Britanana Camadia a Ulais Nombar	OCCUPANT'S SEATING
1. Primary Sampling Unit Number	10. Occupant's Seat Position
2. Case Number - Stratum	Front Seat
3. Vehicle Number	(11) Left side
	(12) Middle (13) Right side
4. Occupant Number	(14) Other (specify):
OCCUPANT'S CHARACTERISTICS	(15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant
6. Occupant's Sex (1) Male (2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown (9) Unknown	Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant Fourth Seat (41) Left side (42) Middle (43) Right side (44) Other (specify):
7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknown	(45) On or in the lap of another occupant (97) In or on unenclosed area (98) Other seat (specify): (99) Unknown
 inches X 2.54 = centimeters Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown pounds X .4536 = kilograms Occupant's Role (1) Driver (2) Passenger (9) Unknown 	11. Occupant's Posture (0) Normal posture Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

EJECTION/ENTRAPMENT				
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown		15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown 16. Entrapment (0) Not entrapped/exit not inhibited		
(0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown		(1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify):		
14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown		 (2) Removed from vehicle due to perceived serious injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (8) Removed from vehicle for other reasons (specify): (9) Unknown 		

	BELT SYSTE	M FUNCTION	
18.	Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify):	22. Manual Shoulder Belt Upper Anchorage Adjustment (0) No manual shoulder belt (1) No upper anchorage adjustment for manual shoulder belt Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position (4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment	 ├
19.	Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify): (12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used	23. Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown	<u>'</u>
20.	Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify):	25. Automatic (Passive) Belt System Type (O) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown 26. Proper Use of Automatic (Passive) Belt System (O) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or	}
21.	Manual (Active) Belt Failure Modes During Accident (O) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other manual belt failure (specify):	automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown 27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):	<u> </u>

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	 31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify): Unknown if belt used	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (_000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (_996) Deployment, unknown longitudinal Delta V (_997) Not deployed (_998) Unknown if deployed (_999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed
38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(8) Unknown if deployed (9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued			HEAD RESTRAINT AND SEAT EVALUATION				
11	Source of Air Bag Damage	ς	49. Head Restraint Type/Damage by Occupant				
++.	(00) Not equipped/not available	-	at This Occupant Position				
	(01) Not damaged		(0) No head restraints				
	(02) Object worn by occupant, (specify):		(1) Integral—no damage (2) Integral—damaged during accident				
	(03) Object carried by occupant, (specify):		(3) Adjustable—no damage (4) Adjustable—damaged during accident				
	· · · · · · · · · · · · · · · · · · ·		(5) Add-on—no damage				
	(04) Adaptive/assistive controls, (specify):		(6) Add-on—damaged during accident (8) Other (specify):				
	(05) Fire in vehicle						
	(06) Thermal burns (07) Rescue or emergency efforts		(9) Unknown				
	(88) Other damage source (specify):		50. Seat Type (this Occupant Position)				
	(95) Damaged, unknown source	_	(00) Occupant not seated or no seat (01) Bucket				
	(96) Deployed, unknown if damaged (97) Not deployed		(02) Bucket with folding back				
	(98) Unknown if deployed		(03) Bench (04) Bench with separate back cushions				
ł	(99) Unknown		(05) Bench with folding back(s)				
		0	(06) Split bench with separate back cushions				
45.	Was The Air Bag Tethered?		(07) Split bench with folding back(s)				
	(0) Not equipped/not available		(08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type)				
	(1) No(2) Yes (specify number of tether straps):		(10) Other seat type (specify):				
			(99) Unknown				
	(3) Deployed, unknown if tethered (7) Not deployed		(99) Olikilowii				
	(8) Unknown if deployed		51. Seat Orientation (this Occupant Position)				
	(9) Unknown	0	(0) Occupant not seated or no seat (1) Forward facing seat				
46.	Did The Air Bag Have Vent Ports?	7	(2) Rear facing seat				
	(0) Not equipped/not available		(3) Side facing seat (inward)				
	(1) No		(4) Side facing seat (outward)				
	(2) Yes (specify number of vent ports):		(8) Other (specify):				
	(3) Deployed, unknown if vent ports present (7) Not deployed		(9) Unknown				
	(8) Unknown if deployed		52. Seat Track Adjusted Position Prior To Impact				
	(9) Unknown	0	(0) Occupant not seated or no seat				
17	Was the Air Bag in this Occupant's Position		(1) Non-adjustable seat track				
4/.	Contacted by Another Occupant?	 	Adjustable Seat Track				
	(0) Not equipped/not available		(2) Seat at forward most track position				
	(1) No		(3) Seat between forward most and middle track				
	(2) Yes (specify):		positions (4) Seat at middle track position				
	(3) Deployed, unknown if other occupant con	tact	(5) Seat between middle and rear most track				
	to air bag (7) Not deployed		positions (6) Seat at rear most track position				
	(8) Unknown if deployed		(9) Unknown				
	(9) Unknown		,				
48.	Was This Occupant Wearing Eye-wear?	,					
	(0) Not air bag equipped/air bag not available						
	(1) No						
	(2) Eyeglasses/sunglasses (3) Contact lenses						
	(4) Deployed, unknown if eyewear worn						
	(7) Not deployed						
	(8) Unknown if deployed						
L_	(9) Unknown						

HEAD RESTRAINT AND SEAT EVALUATION continued

53. Seat Back Incline Prior and Post Impact



- (00) Occupant not seated or no seat
- (01) Not adjustable

Upright prior to impact

- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

Slightly reclined prior to impact

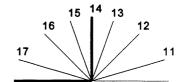
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

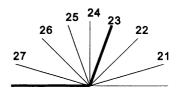
Completely reclined prior to impact

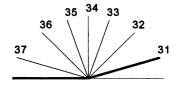
- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)



- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed (specify):____
- (4) Seat track/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion, (specify):
- (7) Combination of above (specify):
- (8) Other (specify):
- (9) Unknown







CHILD SAFETY SEAT 55. Child Safety Seat Make/Model (000) No child safety seat Applicable codes are found in your NASS CDS Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify): (998) Unknown make/model (999) Unknown if child safety seat used 56. Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat - with shield (5) Booster seat - without shield (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used 57. Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (18) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (28) Other orientation (specify): (29) Unknown orientation (99) Unknown if child safety seat used

- 58. Child Safety Seat Harness Usage
- 59. Child Safety Seat Shield Usage



60. Child Safety Seat Tether Usage

Note: Options below applicable to Variables OA58-OA60. (00) No child safety seat

Not Designed With Harness/Shield/Tether

- (01) After market harness/shield/tether added, not used
- (02) After market harness/shield/tether used
- (03) Child safety seat used, but no after market harness/shield/tether added
- (09) Unknown if harness/shield/tether added or used

Designed With Harness/Shield/Tether

- (11) Harness/shield/tether not used
- (12) Harness/shield/tether used
- (19) Unknown if harness/shield/tether used

Unknown If Designed With Harness/Shield/Tether

- (21) Harness/shield/tether not used
- (22) Harness/shield/tether used
- (29) Unknown if harness/shield/tether used
- (99) Unknown if child safety seat used

National Accident Sampling System-Cr INJURY CONSEQUEN		ta System:	Occupant Assessment I	Form	Page
61. Injury Severity (Police Rating) (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown 62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify): Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontrans (6) Treatment later (7) Treatment - other (specify): (8) Transported to a medical facility treated (9) Unknown	4 sported	(0) (1) (2) (3) (4) (5) (8) (9) 64. Hos (00) that (61) (99) 65. Wor (up 1) (ost (00) (61) (62) (97)	e Of Medical Facility (for Not treated at a medical Trauma center Hospital Medical clinic Physician's office Treatment later at medic Other (specify): Unknown pital Stay Not Hospitalized Code the number of day the occupant stayed in 161 days or more Unknown king Days Lost Code the number of day through 60) that the occupant stayed in 161 days or more Unknown king Days Lost Code the number of day through 60) that the occupant stayed in 161 days or more from work due to the accupant stayed in 161 days or more Fatally injured Not working prior to accupant of the stayed Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Fatally injured Not working prior to accupant stayed in 161 days or more Industry injured Not working	facility al facility ys (up thro hospital. ys upant ccident	<u></u>
EME	RGENCY RESPO	NSE INF	FORMATION		
EMS Notification (1) Not notified (2) Notified (9) Unknown	ROAD VEHICLE	EMS (01) (02) (03) (04)	Type Fire department Rescue squad Police department Trauma unit	FIRST	TRANSPORTING
EMS NotificationTime (first unit) (9999) Unknown	ROAD VEHICLE	(05) (06) (07) (08) (98)	Disaster unit Ambulance service unit Hospital Mortuaries/funeral homes Other, specifiy:		EHIČLE
EMS Arrival Time (first unit) (9998) EMS cancelled or did not arrive (9999) Unknown	ROAD VEHICLE	(99) EMS (01)	Unknown Care No care administered	ON-SCENE	DURING TRANSPORT
EMS Departure Time To		(02) (03) (04)	First aid Resuscitation CPR	ROAD	VEHICLE

STOP WORK HERE VARIABLES 66-74 TO BE CODED BY THE ZONE CENTER

(05)

(06)

(07)

(80)

(98)

(99)

Emergency cardiac care

Emergency burn care

Other, specify: ____

Unknown

pulse rate, respiration, EKG)

Combination of above, specify: _

Life support system monitoring (blood pressure,

ROAD VEHICLE

AIR VEHICLE

ROAD VEHICLE

AIR VEHICLE

Treatment Facility (transporting unit)

transport

not used

Unknown

Unknown

EMS Arrival Time At

Treatment Facility

EMS arrived, provided

treatment, but did not

EMS arrived, but was

(9997)

(9998)

(9999)

(9999)

TO BE CODED BY THE ZONE CENTER

INJURY CONSEQUENCES	
	TRAUMA DATA
Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death	72. Was the Occupant Given Blood? (1) No - blood not given
68. 2nd Medically Reported Cause of Death	(2) Yes - blood given (specify units): (9) Unknown if blood given
injury(s) which reportedly contributed to this occupant's death (OO) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify):	73. Arterial Blood Gases (ABG) – HCO ₃ // (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
(97) Other result (includes fatal ruled disease) (specify):	BELT USE DETERMINATION
(99) Unknown	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used



U.S. Department of Transportation National Highway Traffic Safety Administration

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

2. Case Number - Stratum

201E

3. Vehicle Number

201

4. Occupant Number

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

				A.I.S 9	90			Injury			Occupan	
	Source of Injur Data	y Body	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	 Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area	
۵. سرد	oulse											
O A	Data Dular 5. 3	67	7. <u>5</u>	8. <u>/</u>	9. <u>2</u> 20	10. <u>/</u>	11.2	12. <u>697</u>	13. <u>9</u>	14.7	15.29	
2nd	16	17	18	19	20	21	22	23.	24	25	26	
3rd	27	28	29	30	31	32	33	34	35	36	37	
										All May 1116 The second		
446	.	20	40	41.	4.0	43.	44.	45.			40	
4tn	38	39	40.		42.	***	44	43	46	47	48	
5 - -												
5th	49	50	51	52	53	54	55	56	57	58	59	
											ati i di jere di di Ku di jere di di	
6th	60	61	62	63	64	65	66	67	68	69	70	
7th		70										
/tn	7.1	12	/3	/ *	75	/o	,,, <u> </u>	/8	79	80	81	
8th	82	83	84	85	86	87	88	89	90	91	92	
14.												
9th	93.	94	95.	96.	97.	OR	ga	100.	101	102	103	
Juli	. 55	J .		Jo	<i>-</i> ,	33. <u> </u>				102	.03	
	•											
10th	104	105	106	107	108	109	110	111	112	113	114	

	9			occ	UPANT	INJURY	DATA				(
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th	_		_								
12th			_				· ·				
13th					·. 	- 			i <u>-</u>		
14th			-								
15th	. <u> </u>										
16th											
17th											
18th	. ·										
19th									-		
20th											
21st							<u></u>				
22nd				<u> </u>							
23rd											
24th											
25th											

OCCUPANT INJURY CLASSIFICATION **Specific Anatomic** Level of Injury **Aspect Body Region** Structure Head Specific injuries are (1) Right assigned consecutive (2) **Face** (2)Left Vessels, Nerves, Organs. two-digit numbers (3) Bilateral (3)Neck Bones, Joints are assigned beginning with 02. (4)Central (4)**Thorax** consecutive two digit (5) (5) Abdomen Anterior numbers beginning with To the extent possible, (6) **Posterior** (6)Spine **Upper Extremity** within the organizational (7)Superior (7)framework of the AIS, 00 (8) (8) **Lower Extremity** Inferior The exceptions to this rule is assigned to an injury (9)Unknown (9) Unspecified NFS as to severity or (0) Whole region apply to: where only one injury is given in the dictionary for **Type of Anatomic** Whole Area (02) Skin - Abrasion that anatomic structure. Structure (04) Skin - Contusion 99 is assigned to any (06) Skin - Laceration injury NFS as to lesion or (1)Whole Area (08) Skin - Avulsion severity. Vessels (2)(3) (10) Amputation Nerves Organs (includes (20) Burn **Abbreviated Injury Scale** (4)(30) Crush Muscles/ligaments) (40) Degloving Skeletal (includes Minor Injury (5) Moderate Injury (50) Injury - NFS (2)joints) Head - LOC (90) Trauma, other than (3)Serious Injury (6)mechanical (4)Severe Injury (9) Skin (5) Critical Injury Head - LOC (6)Maximum (02) Length of LOC (untreatable) (7)Injured, unknown severity (04) Level (06) of (08) Consciousness (10) Concussion

<u>Spine</u> (02)

Cervical (04) Thoracic (06) Lumbar

SOURCE OF INJURY DATA	INJURY SOURCE	DIRECT/INDIRECT INJURY
	CONFIDENCE LEVEL	
OFFICIAL RECORDS (1) Autopsy records with or without hospital/medical records (2) Hospital/medical records other than emergency room (e.g., discharge summary) (3) Emergency room records only (including associated X-rays or other lab reports) (4) Private physician, walk-in or emergency clinic	(1) Certain(2) Probable(3) Possible(9) Unknown	(1) Direct contact injury (2) Indirect contact injury (3) Noncontact injury (7) Injured, unknown source
UNOFFICIAL RECORDS (5) Lay coroner report (6) E.M.S. personnel (7) Interviewee (8) Other source (specify):		

	×		INJURY	3001	ICLO		`
FRON	т	(102)	Right side hardware or	(183)	Air bag-passenger side and	(411)	Wall mounted head rest
(001)	Windshield		armrest		object held		(used behind wheel chair)
(002)	Mirror	(103)	Right A (A1/A2)-pillar	(184)	Air bag-passenger side and	(412)	Other adaptive device
(003)	Sunvisor	(104)	Right B-pillar		object in mouth		(specify):
(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185)	Air bag compartment		
(005)	Steering wheel hub/spoke				cover-passenger side		
(006)	Steering wheel (combination		Right side window glass	(186)	Air bag compartment	EXTER	RIOR of OCCUPANT'S
	of codes 004 and 005)	(107)	Right side window frame		cover-passenger side and	VEHIC	CLE
(007)	Steering column,		Right side window sill		eyewear	(451)	Hood
	transmission selector lever,	(109)	Right side window glass	(187)	Air bag compartment	(452)	Outside hardware (e.g.,
	other attachment		including one or more of the		cover-passenger side and		outside mirror, antenna)
(800)	Cellular telephone or CB		following: frame, window		jewelry	(453)	Other exterior surface or
	radio		sill, A (A1/A2)-pillar, B-pillar,	(188)	Air bag compartment		tires (specify):
(009)	Add on equipment (e.g.,		or roof side rail.		cover-passenger side and		
. .	tape deck, air conditioner)	(110)	Other right side object		object held		
(010)	Left instrument panel and		(specify):	(189)	Air bag compartment	(454)	Unknown exterior objects
	below				cover-passenger side and		
(011)	Center instrument panel and				object in mouth	EXTER	RIOR OF OTHER MOTOR
(012)	below	INTER		(190)	Other air bag (specify)	VEHIC	LE
(012)	Right instrument panel and		Seat, back support		<u> </u>		Front bumper
(O12)	below Glove compartment door		Belt restraint webbing/buckle	(195)	Other air bag compartment		Hood edge
	Glove compartment door Knee bolster	(153)	Belt restraint B-pillar or door		cover (specify)	(503)	Other front of vehicle
	Windshield including one or	/154\	frame attachment point				(specify):
(013)	more of the following: front	(154)	Other restraint system component (specify):	BOOL			
	header, A (A1/A2)-pillar,		component (speciry):	ROOF	Erent hander	(504)	-
	instrument panel, mirror, or	(155)	Head restraint system		Front header		Hood ornament
	steering assembly (driver		Other occupants (specify):		Rear header Roof left side rail		Windshield, roof rail, A-pilla
	side only)	(100)	Other occupants (specify).		Roof right side rail		Side surface
(016)	Windshield including one or	(161)	Interior loose objects		Roof or convertible top		Side mirrors
,	more of the following: front		Child safety seat (specify):	(203)	noor or convertible top	(509)	Other side protrusions
	header, A (A1/A2)-pillar,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	cime durety sout (apocity).	FLOO	1		(specify):
	instrument panel, or mirror	(163)	Other interior object		Floor (including toe pan)	/E10\	Rear surface
	(passenger side only)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(specify):		Floor or console mounted		Undercarriage
(017)	Windshield reinforced by			(202)	transmission lever, including		Tires and wheels
	exterior object (specify)				console		Other exterior of other motor
		AIR BA	NG.	(253)	Parking brake handle	(0.0,	vehicle (specify):
(019)	Other front object (specify):	(170)	Air bag-driver side		Foot controls including		vernere (specify).
		(171)	Air bag-driver side and		parking brake	(514)	Unknown exterior of other
			eyewear		. 2		motor vehicle
LEFT S	SIDE	(172)	Air bag-driver side and	REAR			
(051)	Left side interior surface,		jewelry	(301)	Backlight (rear window)	OTHER	R VEHICLE OR OBJECT IN
	excluding hardware or	(173)	Air bag-driver side and object		Backlight storage rack,		NVIRONMENT
	armrests		held		door, etc.	(551)	Ground
(052)	Left side hardware or	(174)	Air bag-driver side and object	(303)	Other rear object (specify):		Other vehicle or object
	armrest		in mouth				(specify):
	Left A (A1/A2)-pillar	(175)	Air bag compartment				-
(054)	Left B-pillar		cover-driver side	ADAP	TIVE (ASSISTIVE) DRIVING	(599)	Unknown vehicle or object
(055)	Other left pillar (specify):	(176)	Air bag compartment	EQUIP	MENT		
			cover-driver side and	(401)	Hand controls for	NONC	ONTACT INJURY
	Left side window glass		eyewear		braking/acceleration		Fire in vehicle
	Left side window frame	(177)	Air bag compartment	(402)	Steering control devices		Flying glass
	Left side window sill		cover-driver side and jewelry		(attached to OEM steering		Other noncontact injury
059)	Left side window glass	(178)	Air bag compartment		wheel)		source
	including one or more of the		cover-driver side and object	(403)	Steering knob attached to		(specify):
	following: frame, window		held		steering wheel	(604)	Air bag exhaust gases
	sill, A (A1/A2)-pillar, B-pillar,	(179)	Air bag compartment	(405)	Replacement steering wheel	(697)	Injured, unknown source
	or roof side rail.		cover-driver side and object		(i.e., reduced diameter)		
060)	Other left side object		in mouth	(406)	Joy stick steering controls		
	(specify):		Air bag-passenger side		Wheelchair tie-downs		
		(181)	Air bag-passenger side and	(408)	Modification to seat belts,		
	CIDE		eyewear		(specify):		
RIGHT		(182)	Air bag-passenger side and	(409)	Additional or relocated		
(101)	Right side interior surface,		jewelry		switches, (specify):		
	excluding hardware or						
	armrests				Raised roof		

OFFICIAL INJURY DATA - SOFT TISSUE INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

Restrained?

 $\frac{1}{\sqrt{N_{\text{es}}}}$

Blood Alcohol Level (mg/dl)

BAL =

MOT RECOLISED
Glasgow Coma
Scale Score
A d O x 3
GCSS = 15

Units of Blood Given

...

Units =

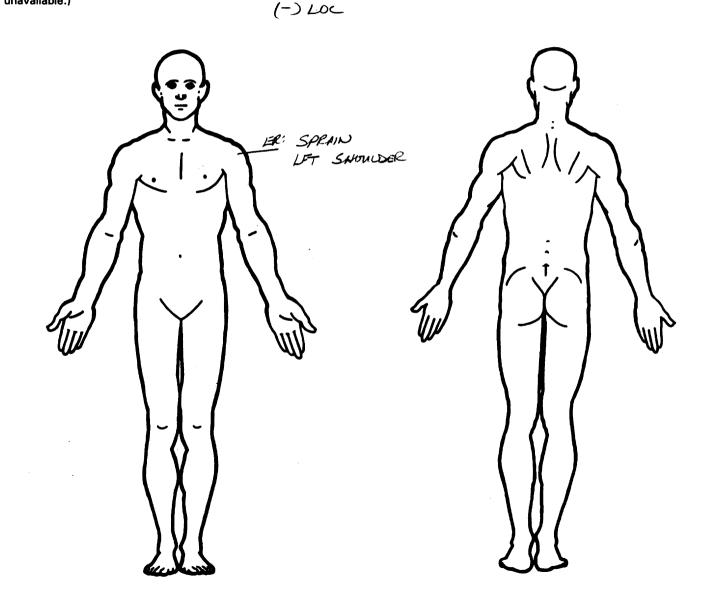
Arterial Blood Gases

pH = /_.__

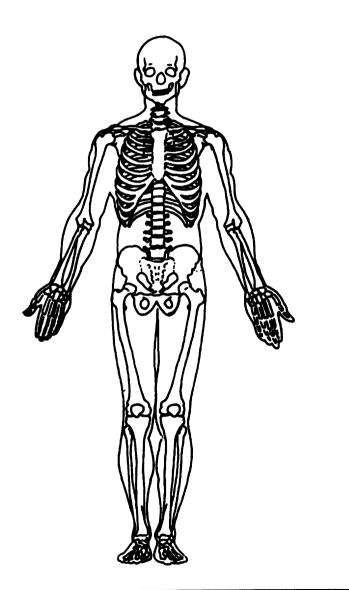
PC/0₂ ____

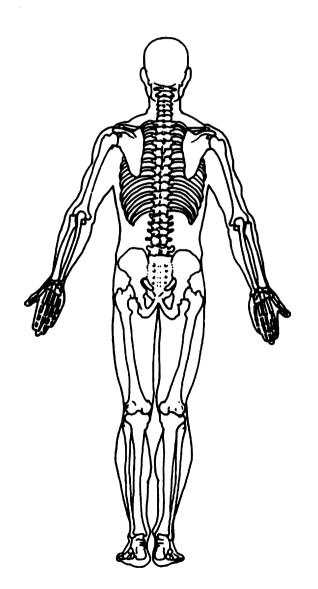
исо₃ ___

NOT RECORDED

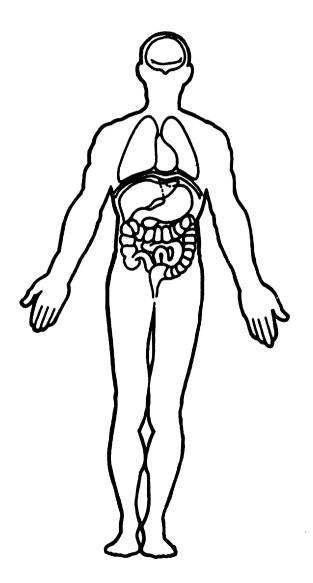


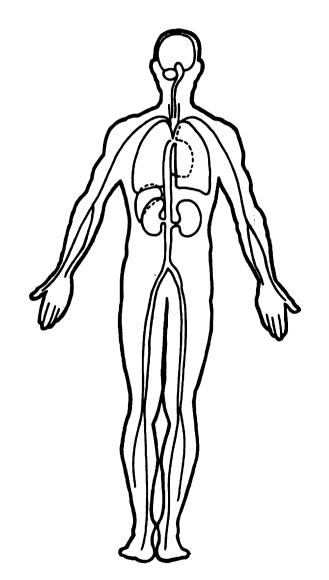
Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM National Highway Traffic Safety Administration **CRASHWORTHINESS DATA SYSTEM OCCUPANT'S SEATING** 1. Primary Sampling Unit Number 10. Occupant's Seat Position 2. Case Number - Stratum Front Seat (11) Left side 3. Vehicle Number (12) Middle (13) Right side 4. Occupant Number (14) Other (specify): **OCCUPANT'S CHARACTERISTICS** (15) On or in the lap of another occupant Second Seat 5. Occupant's Age (21) Left side Code actual age at time of accident. (00) Less than one year old (specify by month): (22) Middle 11 months (23) Right side (24) Other (specify): (97) 97 years and older (25) On or in the lap of another occupant (99) Unknown Third Seat (31) Left side (32) Middle 6. Occupant's Sex (33) Right side (1) Male (34) Other (specify): (2) Female-not reported pregnant (35) On or in the lap of another occupant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) Fourth Seat (41) Left side (6) Female-pregnant-term unknown (42) Middle (9) Unknown (43) Right side (44) Other (specify): (45) On or in the lap of another occupant 7. Occupant's Height (97) In or on unenclosed area Code actual height to the nearest (98) Other seat (specify): centimeter. (999) Unknown (99) Unknown ___ inches X 2.54 = ___ centimeters 11. Occupant's Posture 8. Occupant's Weight (0) Normal posture Code actual weight to the nearest kilogram. Abnormal posture (999) Unknown (1) Kneeling or standing on seat (2) Lying on or across seat ___ pounds X .4536 = ___ __ kilograms (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear 9. Occupant's Role window (1) Driver (5) Sitting on a console (2) Passenger (6) Lying back in a reclined seat position (9) Unknown (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

	EJEC	TION/EI	NTRAPMENT
	Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	\bigcirc	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13.	Ejection Area (O) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown		(0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify):
14.	Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown		serious injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (8) Removed from vehicle for other reasons (specify): (9) Unknown

		BELT S'	YSTEN	M FUNCTION	Į.
18.	(0) (1) (2) (3)	ual (Active) Belt System Availability None available Belt removed/destroyed Shoulder belt Lap belt Lap and shoulder belt Belt available—type unknown	5	Adjustment (0) No manual shoulder belt (1) No upper anchorage adjustment for manual shoulder belt Adjustable shoulder Belt Upper Anchorage	2
	Integ (6) (7)	gral Belt Partially Destroyed Shoulder belt (lap belt destroyed/removed) Lap belt (shoulder belt destroyed/removed) Other belt (specify):		 (2) In full up position (3) In mid position (4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment 	\bigcirc
19	(9) Man	Unknown uual (Active) Belt System Use	5	23. Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available	
10.	(00)	None used, not available, or belt removed/destroyed Inoperative (specify):		(1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown	
	(03)	Shoulder belt Lap belt Lap and shoulder belt		Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown	\bigcirc
	(05) (08)	Belt used—type unknown Other belt used (specify):		24. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative	
	(13)	Shoulder belt used with child safety seat Lap belt used with child safety seat Lap and shoulder belt used with child safety seat		(1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify):	
	(18)	Belt used with child safety seat—type unknown Other belt used with child safety seat (specify):	own	(3) Automátic belt use unknown (9) Unknown	
20		Unknown if belt used per Use of Manual (Active) Belts	\subseteq	25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system	
	(0)	None used or not available Belt used properly Belt used properly with child safety seat		(2) Motorized system (9) Unknown 26. Proper Use of Automatic (Passive)	$\bigcirc $
	<i>Belt</i> (3) (4) (5)	Used Improperly Shoulder belt worn under arm Shoulder belt worn behind back or seat Belt worn around more than one person		Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat	
	(7)	Lap belt worn on abdomen Lap belt or lap and shoulder belt used improperly with child safety seat (specify):		Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than	
		Other improper use of manual belt system (specify): Unknown		one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or	
21.	Mar	nual (Active) Belt Failure Modes		automatic shoulder belt used improperly with child safety seat (specify):	
	(O) (1)	ing Accident No manual belt used or not available No manual belt failure(s) Torn webbing (stretched webbing not included)		(8) Other improper use of automatic belt system (specify): (9) Unknown	\bigvee
	(4)	Broken buckle or latchplate Upper anchorage separated Other anchorage separated (specify):		27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use	\subseteq
		Broken retractor Combination of above (specify):		 (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not include (3) Broken buckle or latchplate (4) Upper anchorage separated 	d)
		Other manual belt failure (specify): Unknown		(5) Other anchorage separated (specify): (6) Broken retractor	
	(5)	CHANGWII		(7) Combination of above (specify): (8) Other automatic belt failure (specify):	
				(9) Unknown	

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown 31. Frontal Air Bag System Deployment
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	(This Occupant Position) (O) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify):	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
γ (Onknown if beit used	33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (_000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (_996) Deployment, unknown longitudinal Delta V (_997) Not deployed (_998) Unknown if deployed (_999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown 38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed (9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(04) Torn (05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM	HEAD RESTRAINT AND SEAT EVALUATION
	EVALUATION continued	49. Head Restraint Type/Damage by Occupant
44.	Source of Air Bag Damage	at This Occupant Position
	(00) Not equipped/not available	(0) No head restraints
	(O1) Not damaged	(1) Integral—no damage
	(02) Object worn by occupant, (specify):	(2) Integral—damaged during accident
		(3) Adjustable—no damage
	(03) Object carried by occupant, (specify):	(4) Adjustable—damaged during accident
	The state of the s	(5) Add-on—no damage
	(04) Adaptive/assistive controls, (specify):	(6) Add-on-damaged during accident
	(05) Fire in vehicle	(8) Other (specify):
	(06) Thermal burns	(9) Unknown
	(07) Rescue or emergency efforts	(a) Olikilowii
	(88) Other damage source (specify):	50. Seat Type (this Occupant Position)
		(00) Occupant not seated or no seat
	(95) Damaged, unknown source	(O1) Bucket
	(96) Deployed, unknown if damaged	(02) Bucket with folding back
	(97) Not deployed	(O3) Bench
	(98) Unknown if deployed	(04) Bench with separate back cushions
	(99) Unknown	(05) Bench with folding back(s)
	()	(06) Split bench with separate back cushions (07) Split bench with folding back(s)
45.	Was The Air Bag Tethered?	(08) Pedestal (i.e., column supported)
	(0) Not equipped/not available	(09) Box mounted seat (i.e., van type)
	(1) No	(10) Other seat type (specify):
	(2) Yes (specify number of tether straps):	
i	(3) Deployed, unknown if tethered	(99) Unknown
	(7) Not deployed	
	(8) Unknown if deployed	51. Seat Orientation (this Occupant Position)
	(9) Unknown	(0) Occupant not seated or no seat
46	Did The Air Bag Have Vent Ports?	(1) Forward facing seat (2) Rear facing seat
40.	(0) Not equipped/not available	(3) Side facing seat (inward)
	(1) No	(4) Side facing seat (outward)
	(2) Yes (specify number of vent ports):	(8) Other (specify):
	(3) Deployed, unknown if vent ports present	(9) Unknown
1	(7) Not deployed	To a . T. I All I be states Below To be seed
	(8) Unknown if deployed	52. Seat Track Adjusted Position Prior To Impact
l	(9) Unknown	(0) Occupant not seated or no seat (1) Non-adjustable seat track
17	Was the Air Bag in this Occupant's Position	(1) NUIT-aujustable seat track
۲′۰	Contacted by Another Occupant?	Adjustable Seat Track
	(0) Not equipped/not available	(2) Seat at forward most track position
	(1) No	(3) Seat between forward most and middle track
1	(2) Yes (specify):	positions
		(4) Seat at middle track position
	(3) Deployed, unknown if other occupant contact	(5) Seat between middle and rear most track
	to air bag	positions
	(7) Not deployed	(6) Seat at rear most track position
1	(8) Unknown if deployed (9) Unknown	(9) Unknown
	(a) OURIDWII	
48	Was This Occupant Wearing Eye-wear?	
′ ′	(0) Not air bag equipped/air bag not available	
	(1) No	
1	(2) Eyeglasses/sunglasses	
	(3) Contact lenses	
	(4) Deployed, unknown if eyewear worn	
	(7) Not deployed	
	(8) Unknown if deployed	
1	(9) Unknown	

HEAD RESTRAINT AND SEAT EVALUATION continued

53. Seat Back Incline Prior and Post Impact



- (00) Occupant not seated or no seat
- (01) Not adjustable

Upright prior to impact

- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

Slightly reclined prior to impact

- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown

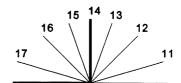


54. Seat Performance (this Occupant Position)

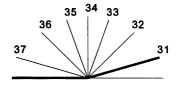
- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed (specify):_____
- (4) Seat track/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion, (specify):____

(7)	Combination	of a	bove	(specify)):
-----	-------------	------	------	-----------	----

- (8) Other (specify):
- (9) Unknown







	CHILI	D SAF	EΤ	SEA	ΛT	
	99	0				0
55.	Child Safety Seat Make/Model	D	58.	Child	Safety Seat Harness Usage	\rightarrow
1	(000) No child safety seat	.				\sim \sim
	Applicable codes are found in your NASS CDS	'	50	Child	Safety Seat Shield Usage	77
	Data Collection, Coding and Editing		59.	Ciliu	Safety Seat Silicia Sage	
	(950) Built-in child safety seat (997) Other make/model (specify):					$\mathcal{O}\mathcal{O}$
Ì	(997) Other make/model (speemy).		60.	Child	Safety Seat Tether Usage	
	(998) Unknown make/model		1			
	(999) Unknown if child safety seat used				Options below applicable to	
		\sim	İ		bles OA58-OA60.	
	T (0131.0 for 0-4	\sim		(00)	No child safety seat	
56.	Type of Child Safety Seat			Not I	Designed With Harness/Shield/T	ether
	(0) No child safety seat (1) Infant seat			(01)	After market harness/shield/tet	her
	(2) Toddler seat			•	added, not used	
	(3) Convertible seat				After market harness/shield/tet	
	(4) Booster seat - with shield			(03)	Child safety seat used, but no	after market
	(5) Booster seat - without shield		i		harness/shield/tether added	
	(7) Other type child safety seat (specify):			(09)	Unknown if harness/shield/teth	er
	(O) II I a see a hild a fate cost type				added or used	
	(8) Unknown child safety seat type(9) Unknown if child safety seat used			Desid	aned With Harness/Shield/Tethe	r
	(9) Olikilowii ii ciiiid salety seat dadd	_	1		Harness/shield/tether not used	
1		9			Harness/shield/tether used	
57.	Child Safety Seat Orientation		ļ	(19)	Unknown if harness/shield/teth	ner used
	(00) No child safety seat				46 B 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Oh: ald/Takhan
1	The Area Calcinate			Unkr	nown If Designed With Harness/ Harness/shield/tether not used	Snieia/ i etnei
	Designed for Rear Facing for This Age/Weight	t			Harness/shield/tether used	
	(O1) Rear facing (O2) Forward facing				Unknown if harness/shield/teth	ner used
	(08) Other orientation (specify):			, ,		
				(99)	Unknown if child safety seat u	sed
	(09) Unknown orientation					
	Designed For Forward Facing for This Age/W	eight				
	(11) Rear facing		1			
	(12) Forward facing		1			
	(18) Other orientation (specify):		Į			
	(19) Unknown orientation					
	Unknown Design or Orientation For This					
	Age/Weight, or Unknown Age/Weight		1			
1	(21) Rear facing		1			
ļ	(22) Forward facing					
	(28) Other orientation (specify):					
	(29) Unknown orientation					
	(99) Unknown if child safety seat used					

National Accident Sampling System-Crashworthiness Da	ta System: Occupant Assessment Form Page
INJURY CONSEQUENCES	
61. Injury Severity (Police Rating)	63. Type Of Medical Facility (for Initial Treatment)
 (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown 	(0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify):
62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):	64. Hospital Stay (00) Not Hospitalized Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more
Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify):	(99) Unknown 65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more
(8) Transported to a medical facility-unknown if treated (9) Unknown	(62) Fatally injured (97) Not working prior to accident (99) Unknown
EMERGENCY RESP	ONSE INFORMATION
EMS Notification (1) Not notified ROAD VEHICLE (2) Notified (9) Unknown AIR VEHICLE	EMS Type FIRST TRANSPORTING
	(OF) Disaster unit AIR VEHICLE

ation notified ied lown	ROAD VEHICLE	(O1)	Fire department	FIRST TRANSPORT
ied		(00)		
		(02)	Rescue squad	
	AIR VEHICLE	(03)	Police department	ROAD VEHICLE
		(04)	Trauma unit	
		(05)	Disaster unit	AIR VEHICLE
ationTime (first unit)		(06)	Ambulance service unit	
nknown	ROAD VEHICLE	(07)	Hospital	
		(80)	Mortuaries/funeral homes	
	AIR VEHICLE	(98)	Other, specifiy:	
		(99)	Unknown	·
Time (first unit)				
MS cancelled or did	ROAD VEHICLE			
ot arrive		EMS	Care	DURIN
nknown	AIR VEHICLE	(01)	No care administered	ON-SCENE DURIN TRANSP
		(02)	First aid	
		(03)	Resuscitation	ROAD VEHICLE
ure Time To		(04)	CPR	
acility (transporting unit)	ROAD VEHICLE	(05)	Emergency cardiac care	AIR VEHICLE
MS arrived, provided		(06)	Life support system monit	oring (blood pressur
eatment, but did not	AIR VEHICLE		pulse rate, respiration, EK	3)
ansport		(07)	Emergency burn care	
MS arrived, but was		(08)	Combination of above, spe	ecify:
ot used		(98)		
nknown		(99)	Unknown	
	Time (first unit) AS cancelled or did at arrive aknown Time To acility (transporting unit) AS arrived, provided eatment, but did not ansport AS arrived, but was at used	Time (first unit) AS cancelled or did ATR VEHICLE Time To acility (transporting unit) AS arrived, provided eatment, but did not ensport AS arrived, but was at used	AIR VEHICLE (06) AIR VEHICLE (98) (99) Time (first unit) AS cancelled or did of arrive (01) AIR VEHICLE (05) AIR VEHICLE (05) AIR VEHICLE (06) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (06) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07) AIR VEHICLE (07)	ATR VEHICLE (07) Hospital (08) Mortuaries/funeral homes (98) Other, specifiy: (99) Unknown Time (first unit) MS cancelled or did of arrive (02) First aid (03) Resuscitation (04) CPR (05) Emergency cardiac care (06) Life support system monitor pulse rate, respiration, EKC (07) Emergency burn care (08) Other, specify: (07) Emergency burn care (08) Combination of above, specify: (08) Other, specify: (08) Ot

TO BE CODED BY THE ZONE CENTER

	INJURY CONSEQUENCES	TRAUMA DATA
66.	Time to Death Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
	1st Medically Reported Cause of Death 2nd Medically Reported Cause of Death	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units):
		(9) Unknown if blood given
69.	3rd Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify):	73. Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
	(97) Other result (includes fatal ruled disease) (specify):	BELT USE DETERMINATION
70	disease) (specify): (99) Unknown Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used

OCCUPANT INJURY FORM

THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:

19	ENTIRE FORM	
[]	PAGE NUMBER (S)	



SMASH PROGRAM SUMMARY

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

National Highway Traffic Safety Administration

(All Measurements In Metric)

Identifying Title Case No.-Stratum **Accident Event** Date (Month, day, year) of Run Primary Sampling Unit Sequence No. **GENERAL** INFORMATION **VEHICLE I VEHICLE 2 NASS Vehicle Number NASS Vehicle Number** Year Year Make Make Model Model **Body Style Body Style** CDC CDC **Damaged Side Damaged Side PDOF** PDOF . Heading Angle Heading Angle VEHICLE SPECIFICATIONS **VEHICLE I VEHICLE 2** Wheelbase Wheelbase **Overall Length Overall Length Overall Width Overall Width** Weight Weight **Engine Displacement Engine Displacement Drive System Drive System** Size Size Stiffness Stiffness DAMAGE INFORMATION **VEHICLE I VEHICLE 2** Damage known? Damage known? Damage Length Damage Length **Damage Offset Damage Offset** cm Crush Depth: Crush Depth: C1 ____ __ cm cm C3 🗘 🔘 cm C3 ___ __ cm C4 ____ ___ cm C5 ____ ___ cm C6 ___ cm

National Accident Sampling System-Crashworthiness Data System: SMASH Program Summary

SCENE INFORMATION				
	Rest and	d Impact Position	ns [XINo I IYes	
i	VEHICLE 1			VEHICLE 2
Rest	х	m	Rest	X m
Position	Υ	m	Position	Y m
	PSI	· •		PSI °
Impact	×	m	Impact	X m
Position	Υ	m	Position	Y m
	PSI	•		PSI °
Slip Angle (-180 to -	+ 180)	· · · · · · · ·	Slip Angle (-180 to	+ 180) °
		VEHICLE	MOTION	
Sustained Contact	[] No [] Yes		Sustained Contact	[] No] Yes VEHICLE 2
Vehicle Rotation Rotation Stop Be	i i No fore Rest [] No	i] Yes [] Yes	Vehicle Rotation Rotation Stop Be	[] No [] Yes
End of Rotation	х	m	End of Rotation	X m
Position	Υ	m	Position	Y m
Curved Path	PSI I I No	l j Yes	Curved Path	PSI °
Point on Path			Point on Path	
X Rotation Direction Rotation >360°	m Y] None] CW] No] Yes	m I] CCW	X Rotation Direction Rotation > 360°	m Ym [] None [] CW [] CCW [] No [] Yes
		RICTION INF	ORMATION	
Coefficient of Frictio Rolling Resistance O	on			· <u>1</u>
Vehicle 1 Rolling Re	sistance		Vehicle 2 Rollin	g Resistance
LF	RF		LF	RF
LR	RR		LR	RR
IF THIS COMMON	IMPACT WAS WITH A	CDS VEHICLE N	<i>OT IN TRANSPORT,</i> FILL	IN THE INFORMATION BELOW.
Model Year:				ene Data and Damage ehicle should be recorded above.
Make:			Complete and A	TTACH the appropriate
Model:				
VIN:			gamage sketch a	nd dimensions to the form.

Summary of Results Using Damage

04-201E

Speed Change (ROLDMISS)

Energy Dissipated = 8294 Joules (5117 Ft-Lb)
Barrier Equivalent Speed = 6.8 km/h (4.3 mph)

Calculated using size and stiffness categories.

Vehicle #2

Total 12 km/h (7 mph)

Longitudinal $-11 \text{ km/h} / \mathcal{L} -7 \text{ mph}$)

Latitudinal 5 km/h (3 mph)

PDOF Angle $-24 ^{\circ}$ Energy Dissipated = 9372 Joules (6911 Ft-Lb)

Energy Dissipated = 9372 Joules (6911 Ft-Lb)
Barrier Equivalent Speed = 12.7 km/h (7.9 mph)

Calculated using size and stiffness categories.

General Information

	Vehicle #1	Vehicle #2
Year	1993	1992
Make	BMW	Nissan
Model	325	Sentra
CDC	01FLEN1	MISSING
Side Damaged	F	F
PDOF Angle	30 °	-24 °
Heading Angle	128 °	2 °
Calculation method:	Size and Stiffness	Size and Stiffness
Size Category	2	1
Stiffness Category	2	1
Vehicle Weight	1711 kgs (3772 lbs)	1096 kgs (2416 lbs)

Damage Information

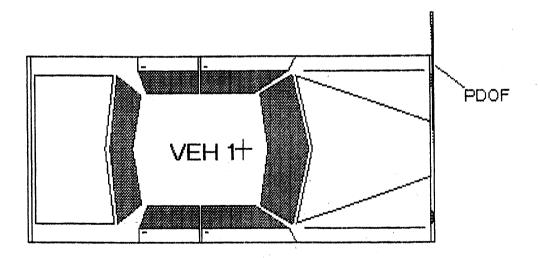
	Vehicle #1	Vehicle #2
Vehicle Damage Known	Yes	No
Crush Length	142.0 cm (56 in)	0.0 cm (0 in)
C1	3.0 cm (1 in)	0.0 cm (0 in)
Č2	2.0 cm (1 in)	0.0 cm (0 in)
C3	1.0 cm (0 in)	0.0 cm (0 in)
C4	0.0 cm (0 in)	0.0 cm (0 in)
C5	0.0 cm (0 in)	0.0 cm (0 in)
C6	0.0 cm (0 in)	0.0 cm (0 in)
D	-52.9 cm (-21 in)	0.0 cm (0 in)
D F	-76.6 cm (-30 in)	0.0 cm (0 in)

Vehicle Dimensions

	Vehicle #1	Vehicle #2
Length Width Wheelbase Weight CG to Front of Veh Engine Displacement	443.0 cm (174 in) 171.0 cm (67 in) 270.0 cm (106 in) 1711 kgs (3772 lbs) 211.6 cm (83 in) 2.5 liters	432.6 cm (170 in) 167.0 cm (66 in) 243.0 cm (96 in) 1096 kgs (2416 lbs) 193.0 cm (76 in) 1.6 liters
Moment of Inertia	303358 kgs (26851 lbs) 1711 kgs (9.8 lb-s^2/in)	185360 kgs (16407 lbs) 1096 kgs (6.3 lb-s^2/in)

1992 Nissan Sentra Vehicle number 2 is missing.

1993 BMW 325



```
04201E00000011 969.0400000000000219040000002
00428600005648906
                0308
04201E00010012
              2969.0410000000000103F0201F
04201E00020012
               969.0410000000000103T3100N
                 9.04 00000000933403402WBABF4319PE 01999064096000808710
04201E01000021
0231213000011410064250
                 9.04 00000000105051101370000801461119099799700005999 999 99
04201E01000022
999999999997302
04201E01000031
                 9.04 000000000023100TYDD02010201FLEE01
  142003002001000000000-05399810627014101000301010101001000
04201E01000041
                 9.04 0000000098110000000012222200122111002666610011111100
04201E01000042
                 9.04 000000000131411
            230000099902110
                 9.04 00000000211165050111000000340000400000017001119977 99
04201E01010051
77797977777302142310000000000010000000000000002011011
04201E01010161
                 9.04 0000000007290602110023100
04201E01010261
                 9.04 0000000007290402110023100
                 9.04 0000000018215205321300000044000020000000000000000000000
04201EÓ1020051
0000000003021223100000000000000097000000001011011
04201E01020161
                 9.04 0000000007790602126023300
                 04201E01030051
000000000003110110000000000242009700000001151011
04201E01030161
                 9.04 0000000003490402111603100
04201E01040051
                 0000000000031101100000000000420097000000003021011
04201E01040161
                 9.04 0000000007290602126022300
04201E01040261
                 9.04 0000000007790602136022300
04201E01040361
                 9.04 0000000003890402121512100
                 04201E01050051
04201E01050161
                 9.04 0000000007790402121513100
04201E02000021
                 9.04 000000009235043021N4EB32A5NC74353201999064096000808790
0211213000010162999151
04201E02000022
                 9.04 0000000010202390103999000000009000212800003012-011+00
5009499840130001
04201E02010051
                 9.04 00000000322999999111900000999999999994099009999999 99
9999999999999999900000000001420099000000001151019
04201E02010161
                 9.04 0000000003751020126979799
04201E02020051
                 9.04 00000000002999999223900000951599900000600000000000000000
```

000000000099999999988299999914200970000000000000

OCCUPANT ASSESSMENT Vehicle: 2 Occupant: 1

11

INTRA ERRORS

POSITION OA10 equals 11 or 13 and AUTOMATIC BELT OA23 does not equal 2, then MANUAL BELT OA18 should equal 3 or 4.

HH0192 HH0193

OHHO191 2 If OCCUPANT AVAILABILITY AVAILABILITY

O1

PSU04 CASE 201E ERROR SUMMARY SCREEN

CURRENT VERSION: 9.04

FORM NAME	NUMBER OF DOLLAR SIGNS	NUMBER OF LEVEL 1 ERRORS	NUMBER OF LEVEL 2 ERRORS	VERSION NUMBER CONSISTENT
Accident	0	0	0	Υ
General Vehicle	O .	Ō	0	Y
Vehicle Exterior	0	0	0	Υ
Vehicle Interior	0	0	0	Υ
Occupant Assessmen	t o	0	1	Υ
Occupant Injury	0	О	O	Υ
Total Inter Errors		0	0	
Total Case Errors	o	o	1	

04201E00000066	9.04 0000000000	AR/CAR - HEA	D ON		
04201E00000171	9.04 0000000001	. was travel	ina sc	uth on a two	lane roadway n
egotiating a left of	urve. V2				I was I badway II
04201E00000271	9.04 0000000000wa	as travelino	north	on the same	roaduay Ut 1
ost control and cro	ssed in to				, oadway: VI I
04201E00000371	9.04 0000000000th	e northhoud	d lane	. The front	of Ut limbely
impacted the front	of V2			# 11162 11 (Lift)	or vi lightly
04201E00000471	9.04 000000000ca	usina V1 ta	overt	urn two compl	ete turns. Bo
th vehicles were to	wed due to		T I - U	min owe combi	ece curns. Do
	9.04 000000000da	mage. Both	occun	ants of V2 we	ore transported
with "C" injuries a	and the			W.107 01 47 46	ne cransporced
04201E00000671		cond left n	secono	er of U1 with	. "D" imiusima
		.aana rano p	~~~~	C. O. AT MICH	n b injuries.
04201E00000181	9.04 00000000001	Intermedia	to 1	GGO DMU COSIA	Тор
Moderate No		The medica		AND DIM OFFEE	inh
04201E00000281	9.04 000000000				
The state of the time that the time that the time that the time that the	3.04 00000000				
04201E00000381	9.04 00000000002	Subcompact	1	oop Nissa Ca	
UNK UN	K-	- and ampara		ANT MIDDEN DE	ntra Front
04201E00000191	9.04 00000000001	Driver	FL	None	face
contusions 1 mirror			r 1	140-1116-	race
04201E00000291	9.04 00000000000	Pass.	FR	None	hand 1
aceration 1 flying		· I will and and iff		140116	mand 1
	9.04 00000000001	Pass	2L	None	chest
contusion 1 C rear				1411	Chest
04201E00000491	9.04 00000000000	Pass.	2M	None	face
laceration 1 flying				7427762	1 CC E
04201E00000591	9.04 00000000000	Pass.	2R	None	hand c
ontusion 1 front s		1 100 000 000	Jan 1 's	7 45 1 6	neard -
04201E00000691	9.04 000000000				
				*	
04201E00000791	9.04 0000000000	? Driver	FL	L&S	shoulder
sprain 1 unknown				Same Sarie Sagar	minact det
04201E00000891	9.04 0000000000	Pass.	2R	Child sea	t no injuri
es					ov nom anglet a

SLIDE INDEX

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

Primary S	ampling Un	nit Number <u></u>	Case Number – Stratum 2016
Slide No.	Vehicle No.	Direction of Picture	Description of Slide Subject Matter
1-3	1	S	Approach
4	l		Evidence Impact
S		SE	Impact
6-15	1	_	Evidence
16	1	S	F, R,
17	1	\mathcal{O}	Lookback F.R. 11 Impact 11 P.O.T.
18		NN	Impact
19	1	\sim	
20-22	7	N	Approach
23	7	\sim	Impact
24	7	N E	LANKBOCK C.P.
20	8	5	LOOKBOCK F.R. "Impact + P.O.T. Exterior
27-51	1		Exterior
52-75	1		Interior

Slide No.	Vehicle No.	Direction of Picture	Description of Slide Subject Matter

















Best Available







01E (1996)#1 Available











PSU 04-201E (1996) #16 Best Available

























Best Available



Best Available







Best Available



wailable







Best Available















PSU 04-201E (1996) #43 Best Available









PSU 04-201E (1996) #47 Best Available









PSU 04-201E (1996) #51 Best Available

































E(1998)#6











1000)#12





